P06000073407

•		•
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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01/30/09--01015--006 **35.00

Off / Dir Resign

OIVISION OF CORPORATIONS

09 JAN 30 PH 12: No

COVER LETTER

TO: Amendment Section Division of Corporations
Becuty
SUBJECT: Blu Medical Spa Inc. (Name of Corporation)
DOCUMENT NUMBER: P060000 73407
2000,121,110,1221,1
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Lena Jarborg (Name of Person)
(Name of Person)
Blu Medical Beauty Spa Finc (Name of Firm/Company)
7050 W Palmetto Parle Rd Suite#20
Borg Raton FL. 33433 (City/State and Zip Code)
For further information concerning this matter, please call:
Lena Janbors at (501) 929-5580 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

DIVISION OF CORPORATIONS

O9 JAN 30 PM 12: 09

I, _	Lena Janborg, hereby resign as Officer Director
of_	Blu Medical Beauty spa, Inc.,
P	Obo CO 73 40 7, a corporation organized under the laws of the State of (Document Number, if known)
	FLORIDA.

(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314