P06000090458

(Requestor's Name)
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(Address)
(Address)
(City/State/Zip/Phone #)
(Olly/Otate/21p/1 Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

Division of Corporations
SUBJECT: <u>miami Cardens Barber Shop Inc</u> (Name of Corporation)
DOCUMENT NUMBER: <u>P0600090458</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert Lee Davis

(Name of Person)

Miami Carders Baber Shopine.

(Name of Firm/Company)

20332 N.W. 2 PVE

(Address)

Miami Gardens, Fl. 33/69

For further information concerning this matter, please call:

Robert Lee Davis at (305) 218-6081 (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Robert Lee Davis, hereby resign as president
of Miami Gardens Barber Shop Inc. (Name of Corporation)
PO60000458, a corporation organized under the laws of the State of (Document Number, if known)
(Document Number, if known) Flor(da.

(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

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