

P06000091256

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300214247983

11/14/11--01064--002 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
NOV 14 PM 2:00

C. Coulliette
C.COULLIETTE

NOV 16 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: K AND K NAILS CORP
(Name of Corporation)

DOCUMENT NUMBER: P06000091256

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KIEN NGUYEN

(Name of Person)

K AND K NAILS CORP

(Name of Firm/Company)

5647 CORAL RIDGE DR

(Address)

CORAL SPRINGS, FL 33076

(City/State and Zip Code)

For further information concerning this matter, please call:

KIEN NGUYEN

(Name of Person)

at (954) 616-9957

(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

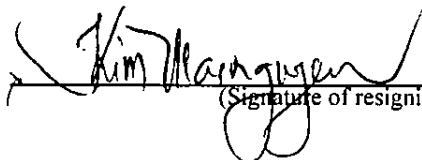
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, KIMMAI NGUYEN, hereby resign as DIRECTOR
(Title)

of KAND K NAILS CORP
(Name of Corporation)

P06000091256, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

 x 11-11-11
(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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
NOV 14 PM 2:00