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No.

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Mejon Salon + Spa Inc. (Name of Corporation)
DOCUMENT NUMBER: #0600 01 13 865
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jonathan Meith (Name of Person)
(Name of Firm/Company)
9623 NW 8th Circle (Address)
Mantation FC 3332 4 (City/State and Zip Code)
For further information concerning this matter, please call:
Donathan Meth at 954, 709-9742
(Name of Person) (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

1, Jonathan Hert	hereby resign as_		CC+or	<u>-</u>
of Name of Corpo (Name of Corpo (Name of Corpo (Document Number, if known)	pration) reporation organized und cof resigning officer/direct	der the laws of the	OB NOV -3 AM 9: 11 State ORETARY OF STATE STATE AHASSEE, FLORIDA	

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