

PD6000127256

(Requestor's Name)

(Address)

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TO: Amendment Section
Division of Corporations

SUBJECT: A Total You, Inc.
(Name of Corporation)

DOCUMENT NUMBER: PO16000127254

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

Please return all correspondence concerning this matter to the following:

Thomas K. Velleff, MD
(Name of Person)

A Total You, Inc.
(Name of Firm/Company)

861 27th Street, Suite 1
(Address)

Palm City, FL 34990
(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas K. Velleff, MD at (772) 276-5220
(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**

I, Kathleen A. Velteff, hereby resign as Vice President & Secretary
(Title)

of A Total You, Inc.
(Name of Corporation)

PO6000127256, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

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TALLAHASSEE, 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