

P07000035363

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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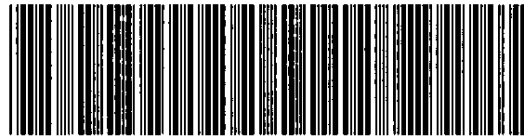
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DDP 6/22/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: New Paradise Beauty Salon, & Spa, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P07000035363

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

Please return all correspondence concerning this matter to the following:

Hector J. Mir, Esq.

(Name of Person)

Hector J. Mir, P.A.

(Name of Firm/Company)

2655 Lejeune Road, Suite 1107

(Address)

Coral Gables, FL 33134

(City/State and Zip Code)

For further information concerning this matter, please call:

Hector J. Mir

(Name of Person)

at (305) 444-0460

(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, Marisol Casola, hereby resign as Vice President and Secretary
(Title)

of New Paradise Beauty Salon & Spa, Inc.
(Name of Corporation)

P07000035363, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

FILED
10 JUN 21 PM 1:46
SECRETARY OF STATE
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