

PO7000099837

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

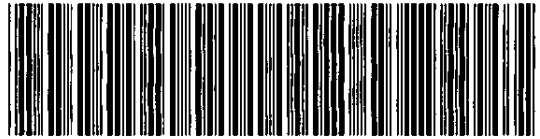
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000154962430

05/01/09--01027--012 **35.00

FILED

2009 MAY -1 PM 3:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

off. Resign.

TB

5-8-09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GAVIOTA SALON AND SPA, INC
(Name of Corporation)

DOCUMENT NUMBER: P07000099837

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

Please return all correspondence concerning this matter to the following:

LEONARDO VIOTA SESIN, ESQ
(Name of Person)

(Name of Firm/Company)

5950 West 16th Avenue
(Address)

Niagara, Florida 33012
(City/State and Zip Code)

For further information concerning this matter, please call:

LEONARDO VIOTA SESIN at (305) 231-7767
(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, OLGA MARRERO, hereby resign as PRESIDENT AND OFFICER
(Title)

of GAVIOTA Salon & Spa Inc.
(Name of Corporation)

P07000099837, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.


(Signature of resigning officer/director)

FILED
2009 MAY -1 PM 3:34
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