

P08000085760

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

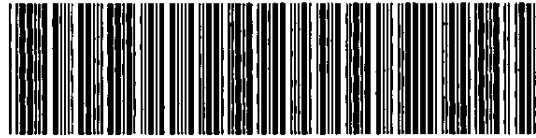
(Business Entity Name)

(Document Number)

Certified Copies 0 Certificates of Status 0

Special Instructions to Filing Officer:

Office Use Only



600162193826

11/02/09--01022--022 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 NOV -2 AM 9:31

FILED

off. Resign.

TB

NOV - 4 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Glitz Med Spa Inc.
(Name of Corporation)

DOCUMENT NUMBER: P08000085760

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

Please return all correspondence concerning this matter to the following:

Vincent Esson
(Name of Person)

Glitz Med Spa, Inc.
(Name of Firm/Company)

189 S. Orange Ave. Ste. 1850 S
(Address)

Orlando FL 32801
(City/State and Zip Code)

For further information concerning this matter, please call:

Lilibette Nunez at (407) 694-2829
(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**

FILED
2009 NOV -2 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Vincent Esson, hereby resign as President
(Title)

of Glitzz Med Spa, Inc
(Name of Corporation)

P08000085760, a corporation organized under the laws of the State of
(Document Number, if known)
Florida.


(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