

P090000/5060

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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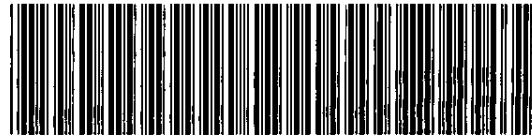
(Business Entity Name)

(Document Number)

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TALENT ADVISORY BOARD

DEC 13 PM 12:56

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O/D Resign.

12-15-10

Dc

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** VIP BEAUTY SALON AND SPA, CORP.  
(Name of Corporation)

**DOCUMENT NUMBER:** P09000015060

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

Please return all correspondence concerning this matter to the following:

JUAN C. ALZATE

(Name of Person)

VIP BEAUTY SALON AND SPA, CORP.

(Name of Firm/Company)

18206 COLLINS AVENUE

(Address)

SUNNY ISLES BEACH, FL 33160

(City/State and Zip Code)

For further information concerning this matter, please call:

JUAN C. ALZATE

(Name of Person)

at ( 786 ) 506-4371

(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, NELSON JARAMILLO, hereby resign as VICE-PRESIDENT  
(Title)

of VIP BEAUTY SALON AND SPA, CORP.  
(Name of Corporation)

P09000015060, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

*Nelson Jaramillo*  
(Signature of resigning officer/director)  
*TO BE SIGNED BY NELSON JARAMILLO*

**FILED**  
**19 DEC 13 PM 12:56**  
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