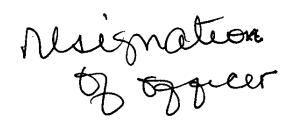
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(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Spincare, Inc.	
(Name of Corporation	n)
DOCUMENT NUMBER: P09000020426	
The enclosed Officer/Director Resignation for a Corporation and	d fee are submitted for filing
Please return all correspondence concerning this matter to the fo	ollowing:
Angel N. Pardo	
(Name of Person)	
(Name of Firm/Company)	
P. O. Box 55-7605	
(Address)	
Miami, FL 33255	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
SAME at (786) 3	16-8282 Daytime Telephone Number)
(Name of Person) (Area Code & 1	Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Depa	artment 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	

FILED

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION 7

2011 JUN 13 PM 4: 02

SECRETARY OF STATE TALLAHASSEE FLORID.

I. Angel N. Pardo	, hereby resign as	President
		(Title)
of Spincare, Inc.		
(Nan	ne of Corporation)	
P09000020426	, a corporation organized under the laws of the State of	
(Document Number, if known)		
Florida	·	

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314