

P09000035809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

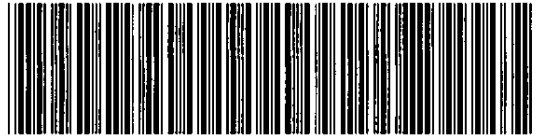
(Business Entity Name)

(Document Number)

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off. Resign.

TB

SEP 14 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MODA IBIZA, INC.
(Name of Corporation)

DOCUMENT NUMBER: P09000035809

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

Please return all correspondence concerning this matter to the following:

MURIEL DARU
(Name of Person)

MODA IBIZA, INC.
(Name of Firm/Company)

1760 LENOX AVENUE
(Address)

MIAMI BEACH, FL 33139
(City/State and Zip Code)

For further information concerning this matter, please call:

MURIEL DARU at (305) 527-5399
(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

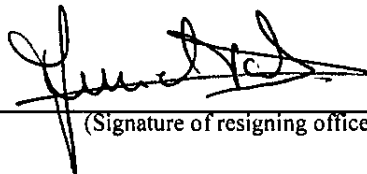
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, MURIEL DARU, hereby resign as Vice President
(Title)

of MODA IBIZA, INC.
(Name of Corporation)

P09000035809, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.


(Signature of resigning officer/director)

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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