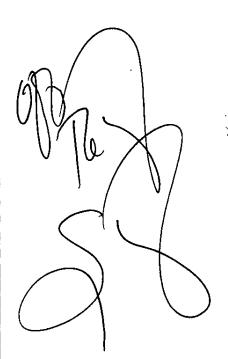
PUUU/6595

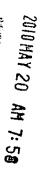
(Rec	questor's Name)	
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COVER LETTER

TO:	Amendment Section Division of Corporations
SUE	BJECT: Silver Leaf Spas, Inc (Name of Corporation)
D	D4000044505
DOC	CUMENT NUMBER: P10000016595
The	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Plea	se return all correspondence concerning this matter to the following:
Kel	lly Gingras
	(Name of Person)
	(Name of Firm/Company)
559	93 Rutherford Place
	(Address)
Ov	iedo, Florida 32765
	(City/State and Zip Code)
For t	further information concerning this matter, please call:
Kell	ly Gingras at (407) 463-8141 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Encl	losed is a check for \$35.00 made payable to the Florida Department of State.
Ame Divi Clift 2661	et Address: Endment Section Sion of Corporations On Building Executive Center Circle Shapesee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

L Kelly Gingras	, hereby resign as VP	
	(Title)	
of Silver Leaf Spas, Inc.	,	
	(Name of Corporation)	
P10000016595 (Document Number, if know	, a corporation organized under the laws of the State of	
Florida		
X	Signature of resigning officer/director) AH 7: 8	

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