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SECRETARY OF STATE



COVER LETTER

Division of Corporation	S
SUBJECT: Bliss S.	alon Inc.
	(Name of Corporation)
DOCUMENT NUMBER:	Name of Corporation) P100000 250 92
The enclosed Officer/Director F	Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence	e concerning this matter to the following:
0	
Kyan Fitzgera (Name of	Person)
	:
Bliss Salon	Tnc.
(Name of the	e Company)
1086 3rd 5t . M	J
(Addr	ess)
Jacksonville Be	ach, FL. 32250 d Zip Code)
For further information concern	ing this matter, please call:
Ryan Fitzgera	at (904) 716 - 6714 (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

TO: Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1; <u>Courtney Costello</u> ,	, hereby resign as	President + (Title)	Co Owne	-
of Bliss Salon Inc.	n)		·,	
	,	r the laws of the State	of	
Florida				
(Signature of re	esigning officer/director)	, ,		
EII INC DE	E 15 625 00 *		10 JUN I U AF	

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

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