

P100000059450

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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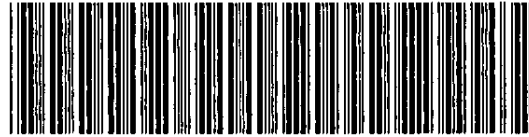
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

JUL 24 2012

T. ROBERTS

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: BETHANIA HAIR DESIGN AND SPA INC.  
(Name of Corporation)

DOCUMENT NUMBER: P10000059450

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

Please return all correspondence concerning this matter to the following:

OLGA F. DELGADO

(Name of Person)

(Name of Firm/Company)

10675 N KENDALL DR SUITE 5-B

(Address)

MIAMI, FLORIDA 33176

(City/State and Zip Code)

For further information concerning this matter, please call:

LEANDRO J BREA

(Name of Person)

at ( 305 ) 642-2732

(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**

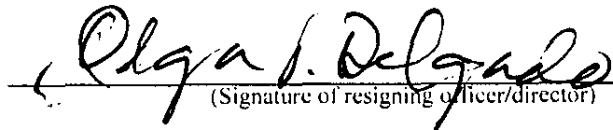
**FILED**  
**12 JUL 23 PM 3:49**  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, OLGA F. DELGADO, hereby resign as VICE PRESIDENT  
(Title)

of BETHANIA HAIR DESIGN AND SPA, INC.  
(Name of Corporation)

P10000059450, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

**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