

P10000097419

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

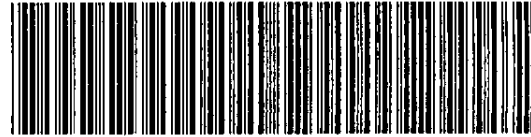
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

off. Resign

TB 1-31-11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 1ST ESCAPE DAY SPA, INC.

(Name of Corporation)

DOCUMENT NUMBER: P10000097419

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

Please return all correspondence concerning this matter to the following:

NGOC V NGUYEN

(Name of Person)

1ST ESCAPE DAY SPA, INC.

(Name of Firm/Company)

184 TOWNE CENTER CIRCLE

(Address)

SANFORD, FL 32771

(City/State and Zip Code)

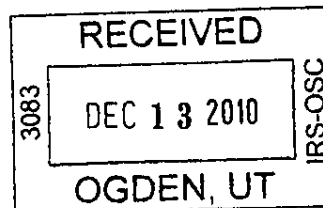
For further information concerning this matter, please call:

NGOC V NGUYEN

(Name of Person)

at (321) 356-3961

(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**

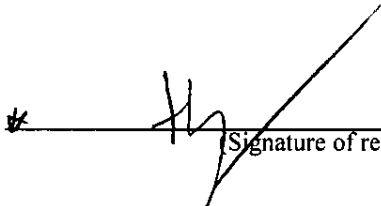
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, HELEN H DUONG, hereby resign as V/P & SECRETARY
(Title)

of 1ST ESCAPE DAY SPA INC
(Name of Corporation)

P10000097419, 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