

P10000098902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

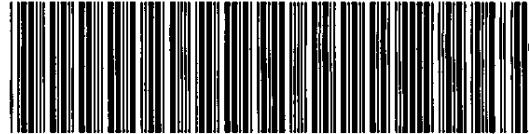
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400257083444

03/03/14--01014--010 \*\*35.00

FILED  
14 MAR -3 PM 4:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR 04 2014

G. CARROTHERS

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** BNT NAILS SALON, INC  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P10000098902  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

HIEN VU

\_\_\_\_\_  
(Name of Person)

BNT NAILS SALON, INC

\_\_\_\_\_  
(Name of Firm/Company)

137 ARAGON AVE

\_\_\_\_\_  
(Address)

CORAL GABLES, FLORIDA 33134

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

BAO THANH NGUYEN

305 569-7659

\_\_\_\_\_  
(Name of Person)

at (\_\_\_\_\_) \_\_\_\_\_

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

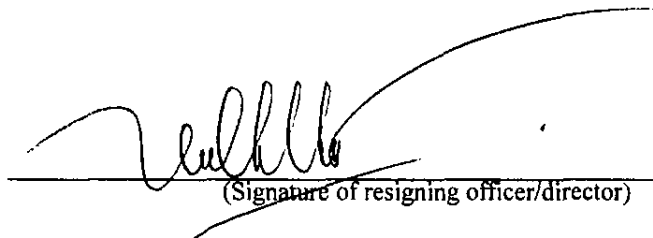
**Street Address:**  
Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, HIEN VU, hereby resign as SD  
(Title)

of BNT NAILS SALON, INC  
(Name of Corporation)

P0000098902, 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