P11000102595

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	:#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
<u> </u>		· · · · · · · · · · · · · · · · · · ·
Special Instructions to	Filing Officer:	
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Office Use Only



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010 Resignation

TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Body Jax Fithes Corporation)
DOCUMENT NUMBER: P 11000102595
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Cheryle Lackowski (Name of Person)
Body Jax Fitness (Name of Firm/Company)
100 N Laura St, Ste 200 (Address)
Jack Souille F1 32202 (City/State and Zip Code)
For further information concerning this matter, please call:
Cheryle Lackowski at (904) 571-2641 (Name of Person) at (904) 571-2641 (Area Code & Daytime Telephone Number)
(Name of Person) (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

l, _	Cheryle Lackowski, hereby resign as President
of_	Body Tax Fitness Corp. (Name of Corporation)
	P11000102595 , a corporation organized under the laws of the State of (Document Number, if known)
	Florida
	Cheyle Lachaski
	(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