

P13000009368

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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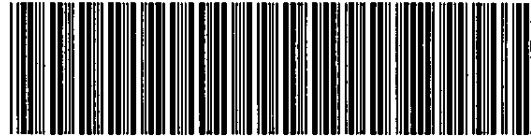
(Business Entity Name)

(Document Number)

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**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SHAYBELLA'S SALON AND SPA INC.

(Name of Corporation)

**DOCUMENT NUMBER:** P13000009368

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

Please return all correspondence concerning this matter to the following:

**JEAN-ROBERT F GEDEON**

(Name of Person)

**SHAYBELLA'S SALON AND SPA INC.**

(Name of Firm/Company)

**802 N SANTA CANTALINA CIRCLE**

(Address)

**NORTH LAUDERDALE, FL 33068**

(City/State and Zip Code)

For further information concerning this matter, please call:

**JEAN-ROBERT F GEDEON** at **305 650-2668**

(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

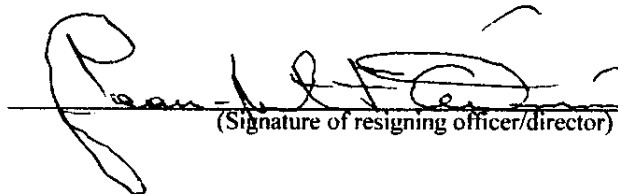
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, JEAN-ROBERT F GEDEON, hereby resign as VICE-PRESIDENT  
(Title)

of SHAYBELLA'S SALON AND SPA INC.  
(Name of Corporation)

P13000009368, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

FILED  
STATE  
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DIVISION OF  
14 FEB 10 AM 11:47

**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