

P14000087888

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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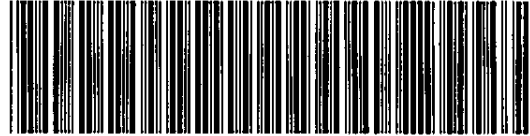
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

CL
3-16-15

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: HAIRCUTS AND SHAVES INC.

(Name of Corporation)

DOCUMENT NUMBER: P14000087888

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

Please return all correspondence concerning this matter to the following:

Robert Martinez

(Name of Person)

Haircuts and Shaves Inc.

(Name of Firm/Company)

2800 Nova Road, Unit 2

(Address)

Daytona Beach, Florida 32119

(City/State and Zip Code)

For further information concerning this matter, please call:

Juan J Garcia

(Name of Person)

at (407) 729-1413

(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**

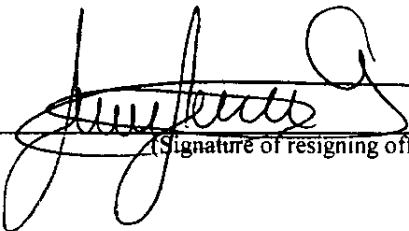
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 MAR 13 PM 1:47

I, JUAN GARCIA, hereby resign as Vice President
(Title)

of HAIRCUTS AND SHAVES INC
(Name of Corporation)

P14000087888, 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