

P15 000029975

(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



900291645809

10/31/16--01010--022 **35.00

FILED
2016 OCT 31 PM 3:49
SECRETARY OF STATE
TALLAHASSEE, FL 32310

11/20/16

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Flora De Spa Inc.

(Name of Corporation)

DOCUMENT NUMBER: P15000029975

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

Please return all correspondence concerning this matter to the following:

Liang Hu

(Name of Person)

Flora De Spa Inc.

(Name of Firm/Company)

4611 S University Dr, Apt 177

(Address)

Davie, Florida, 33328

(City/State and Zip Code)

For further information concerning this matter, please call:

Liang Hu

954

305-3783

(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, Liang Hu, hereby resign as Secretary
(Title)

of Flora De Spa Inc.
(Name of Corporation)

P15000029975

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



(Signature of resigning officer/director)

FILED
2016 OCT 31 PM 3:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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