

P160000078333

(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



600313679506

06/04/18--01006--029 **35.00

FILED
2018 JUN -4 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CD/RCS

JUN 05 2018

I ALBRITTON

!

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, ADELINA E PEREZ, hereby resign as PRESIDENT
(Title)

of CASTILLO HAIR CENTER CORP
(Name of Corporation)

P16000078333, 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

FILED
2018 JUN -4 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314