

P18000 048 810

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

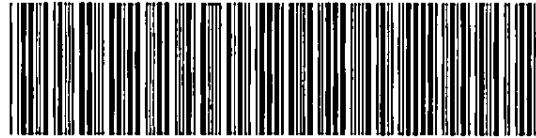
(Business Entity Name)

(Document Number)

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NOT FOR STATE  
OFFICE OF THE CLERK  
OF THE SUPREME COURT

o/o Resignation

NOV 14 2019

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**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Hairmess Salon, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P18000098810

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

Please return all correspondence concerning this matter to the following:

Inna Tsalkovich  
(Name of Person)

Hairmess Salon, Inc.  
(Name of Firm/Company)

10607 Stonebridge Blvd  
(Address)

Boca Raton, FL 33498  
(City/State and Zip Code)

For further information concerning this matter, please call:

Inna Tsalkovich at ( 917 ) 518-8413  
(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

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RECEIVED  
DIVISION OF CORPORATIONS  
OCT 25 1999

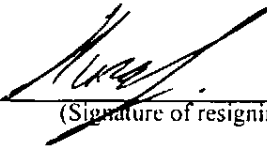
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Uri Nizhnik, hereby resign as Vice President  
(Title)

of Hairmess Salon, Inc.  
(Name of Corporation)

P18000098810, 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

FILED  
SECTION OF STATE  
DEPARTMENT OF  
CORPORATIONS  
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