

P19 000025944

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

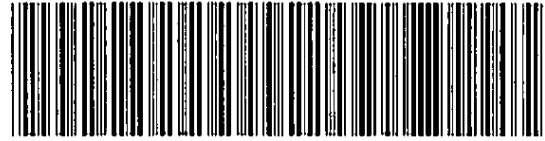
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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Old Resignation

SEP 14 2019

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MIAMI LAKES AESTHETICS, INC
(Name of Corporation)

DOCUMENT NUMBER: P19000025949

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

Please return all correspondence concerning this matter to the following:

AIMEE BARRETO

(Name of Person)

MIAMI LAKES AESTHETICS, INC

(Name of Firm/Company)

7975 NW 154TH STREET SUITE 390

(Address)

MIAMI LAKES, FL 33016

(City/State and Zip Code)

For further information concerning this matter, please call:

Cira Gonzalez

(Name of Person)

at (**305**) **559-6672**

(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

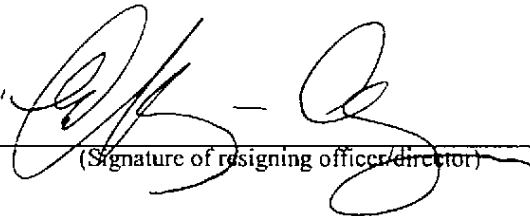
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**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, EILEEN RUIZ CRUZ, hereby resign as Vice President
(Title)

of MIAMI LAKES AESTHETICS, INC
(Name of Corporation)

P19000025949, 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

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DIVISION OF CORPORATIONS
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