

P200000 45901

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

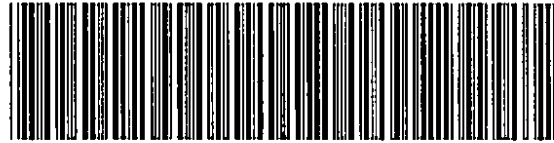
(Document Number)

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09/23/20--01012--022 **25.00

02/02/21--01009--003 **35.00

FILED
2021 JAN 14 P 2:19
CLERK OF COURT
JACKSONVILLE, FLORIDA

OLD
Resign'

JAN 26 2021
TENNIS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 10, 2020

LIDIBEIDYS CRUZ
27707 S. DIXIE HWY, UNIT 213
HOMESTEAD, FL 33032

SUBJECT: I&L BEAUTY, NAILS AND SPA INC
Ref. Number: P20000045901

We have received your document for I&L BEAUTY, NAILS AND SPA INC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell
Regulatory Specialist II Supervisor

Letter Number: 620A00024776

*Please File my Resignation, Form has been
file with the information and the money
owed is FOR \$35.00.*

Sincerely, Indira

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: J & L Beauty Nails and Spa.
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Ridibeidys Cruz
(Contact Person)

J & L Beauty Nails and Spa.
(Firm/Company)

27707 S. Dixie Hwy unit 213
(Address)

Homeslead FL 33030.
(City/State and Zip Code)

For further information concerning this matter, please call:

Ridibeidys at (786) 355-9759.
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Ingrid Izquierdo Martinez hereby resign as President.
(Title)

of IDL Beauty, Nail and SPA Inc.
(Name of Corporation)

P20000045901, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.

Ingrid Izquierdo
(Signature of resigning officer/director)

2021 JAN 14 P 2:19
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

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