PA100003051

(Requestor's Name)		
(Address)		
(Address)		
(1001000)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
		
Special Instructions to Filing Officer:		





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03/29/21--01028--028 **35.00

2021 HAR 29 PH 3: I SECRETARY OF STAT

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TRANSMITTAL LETTER

SUBJECT:	(Name of Corporation)	
DOCUMENT NUMBER: P2100003051		
The enclosed Officer/Director Resignation	for a Corporation and fee are submitted for filing	
Please return all correspondence concernin	g this matter to the following:	
IRMA L. VELASQUEZ		
(Name of Person)		
FANTASTIC BEAUTY SALON, CORP		
(Name of Firm/Company)		
2009 STATE ROAD 7		
(Address)		
FORT LAUDERDALE, FL 33317		
(City/State and Zip Code)		
For further information concerning this ma	uter, please call:	
IRMA L VELASQUEZ	at (786 920-5584 (Area Code & Daytime Telephone Number)	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for \$35.00 made payal	ple to the Florida Department of State.	
Mailing Address:	Street Address:	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

TO: Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

ROSMARY A FLORES-LAZO	VP . hereby resign as	
· <u></u>	nereoy resign us	(Title)
FANTASTIC BEAUTY SALON, CORI	,	
(Nan	ne of Corporation)	· · · · · · · · · · · · · · · · · · ·
2100003051 (Document Number, if known)	, a corporation organized under the	laws of the State of
LORIDA		
	·	
Bouttert.		2021 HAR 29 SECRETAR TALLAH
	(Signature of resigning officer/director)	HAR
		3 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m
		SSET
		<u> </u>

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

FILING FEE IS \$35.00

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