P9900094342

(Re	questor's Name)	
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(Add	dress)	
(Cit	y/State/Zip/Phon	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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02/13/06--D1004--014 **35.00

DIVISION OF CORPORATION

75 2/16/06 OBPRES.

COVER LETTER

Division of Corporations

SUBJECT: AAA Acupyessore Theraputic Massage Mc (Name of Corporation)

DOCUMENT NUMBER: P99000 94342

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

Please return all correspondence concerning this matter to the following:

Elizabeth T. Black
(Name of Firm/Company)

AAA Acupyessore

(Name of Firm/Company)

2900 - 1454 N; #34

(Address)

Nourles FC 3403

(City/State and Zip Code)

For further information concerning this matter, please call:

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION SECRETARY OF STATE FOR A CORPORATION 06 FEB 13 PM 1: 25

I, Jason	BLACK	, hereby resign as	President (Title)
of AAA	Acupressure	Therapy:	tic Message, INC.
P99000	0094342, a corporation of the co	poration organized und	ler the laws of the State of
Horid	<u>a</u> .	x	

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