

P01000111997

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600013279196

03/07/03--01023--010 \*\*35.00

FILED

03 MAR -7 AM 10:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P01000111997  
O'Dell  
3-7-03

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MAD SHADES, INC

(Name of Corporation)

**DOCUMENT NUMBER:**

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

Please return all correspondence concerning this matter to the following:

DUANE BUGGERT

(Name of Person)

MAD SHADES, INC

(Name of Firm/Company)

2534 WILSON STREET

(Address)

HOLLYWOOD, FL 33020

(City/State and Zip Code)

For further information concerning this matter, please call:

DUANE BUGGERT

(Name of Person)

at ( 954 ) 922-6456

(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:**

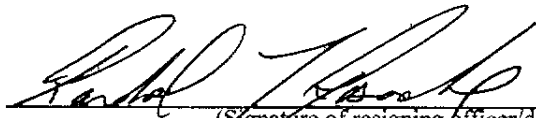
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, RANDALL THOMAS ROSADO, hereby resign as VICE-PRESIDENT  
(Title)

of MAD SHADES, INC  
(Name of Corporation)

\_\_\_\_\_, a corporation organized under the laws of the State of  
(Document Number, if known)  
FLORIDA

  
(Signature of resigning officer/director)

**FILED**  
03 MAR -7 AM 10:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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