

P05000103508

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

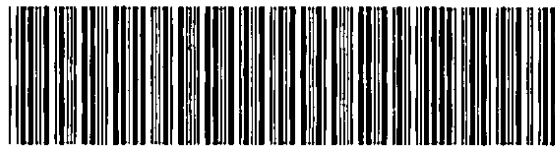
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



900350926509

08/24/20 - 01027 - 003 \*\* 1.00

FILED  
2020 AUG 24 PM 3:19  
SECRETARY OF STATE  
TALLAHASSEE, FL

JL 10/07/20

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** JADE SHOES INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P 05000103508

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

Please return all correspondence concerning this matter to the following:

JUDITH L ALLIGOOD  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

8750 S Ocean DRIVE #836  
(Address)

Jensen Beach FL 34957  
(City/State and Zip Code)

For further information concerning this matter, please call:

Judith Alligood at ( 414 ) 405-4056  
(Name of Person) (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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, JUDITH ALLIGOOD, hereby resign as VS - VICE President & Secretary  
(Title)

of JADE SHOES INC.

(Name of Corporation)

P05000103508

(Document Number, if known)

a corporation organized under the laws of the State of

FLORIDA

Judith L Alligood

(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

SECRETARY OF STATE  
TALLAHASSEE, FL

2020 AUG 24 PM 3:19

**FILED**