

P090000 94150

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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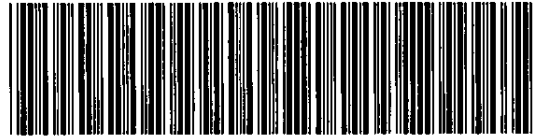
(Business Entity Name)

(Document Number)

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12 JAN 20 PM 12:24  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

*Th 1-13-12*

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SHIDE A WORDS, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P09000094150

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

Please return all correspondence concerning this matter to the following:

Frank Casaccia  
(Name of Person)

SHIDE A WORDS, Inc.  
(Name of Firm/Company)

1601 NE 18th Ave.  
(Address)

Ft. Lauderdale, FL 33305  
(City/State and Zip Code)

For further information concerning this matter, please call:

Frank Casaccia at ( 954 ) 594-2526  
(Name of Person) (Area Code & Daytime Telephone Number)

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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

**FILED**  
12 JAN 20 PM 12:24  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

I, Nancy Saad, hereby resign as Director  
(Title)

of SHIDE A WORDS, Inc.  
(Name of Corporation)

P09000094150, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Nancy Saad  
(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