P13000073189

(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



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10/03/13--01016--010 **35.00

FILED WEST



TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

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
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

_{I.} JOE E. SAUD	, hereby resign as PRESIDENT
	(Title)
of EMPOWERED EMP	
P13000073189 (Document Number, if known)	organized under the laws of the State of
FLORIDA	CE CE
(Signatur	e 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