

PS000050414

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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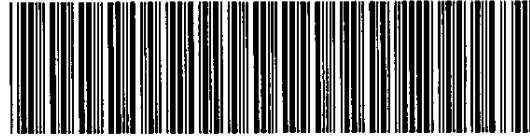
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DEC 11 2015

T. LEMIEUX

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Jerrold E. Slutzky, J.D., CFP®  
Attorney at Law

**Slutzky Law Firm**  
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www.SlutzkyLawFirm.com

Pasco County Office  
20719 Sterlington Drive, Suite 103  
Land O' Lakes, FL 34638  
(813) 909-1515

December 4, 2015

Amendment Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: Bibicord, Inc - Resignation of Director enclosed

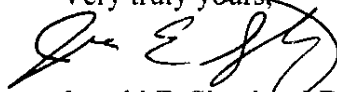
To Whom It May Concern:

In connection with the above corporation, I have enclosed a Resignation of Director.

Please expedite.

If you have any questions, please do not hesitate to call me.

Very truly yours,



Jerrold E. Slutzky, J.D., CFP®

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Bibicord, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P15000050414

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

Please return all correspondence concerning this matter to the following:

Jerrold E. Slutzky  
(Name of Person)

Slutzky Law Firm  
(Name of Firm/Company)

20719 Sterlington Drive, Suite 103  
(Address)

Land O Lakes, FL 34638  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jerrold E. Slutzky at ( 813 ) 909-1515  
(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  
2661 Executive Center Circle  
Tallahassee, FL 32301

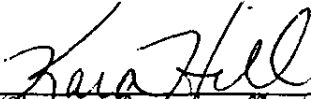
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Kara Hill, hereby resign as Director  
(Title)

of Bibicord, Inc.  
(Name of Corporation)

P15000050414, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida.

  
(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

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