

P 95000050885

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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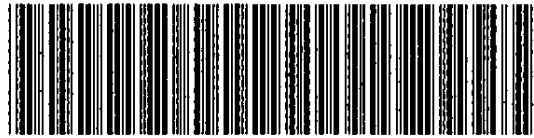
(Business Entity Name)

(Document Number)

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[Signature]

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ZAID ENTERPRISES INC
(Name of Corporation)

DOCUMENT NUMBER: P95000050885

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

Please return all correspondence concerning this matter to the following:

ADELFA DIAZ

(Name of Person)

ZAID ENTERPRISES INC

(Name of Firm/Company)

10625 SW 127 PL

(Address)

MIAMI, FL 33186

(City/State and Zip Code)

For further information concerning this matter, please call:

ADELFA DIAZ

(Name of Person)

at (786) 355-1847
(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

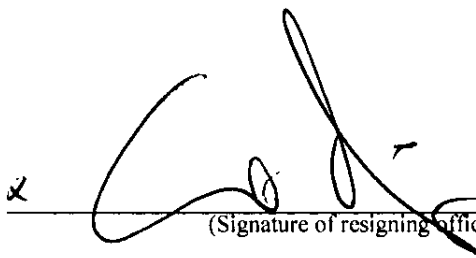
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, ALBERTO DIAZ, hereby resign as VICE-PRES, SECRETARY
(Title)

of ZAID ENTERPRISES INC.
(Name of Corporation)

P95000050885, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.


(Signature of resigning officer/director)

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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