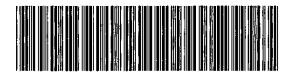
P97000102248

(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:		
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SSEE FLORIDA

Of Resign

C.COULLIETTE

JUN - 8 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SAADEH INC
(Name of Corporation)
DOCUMENT NUMBER: P97000102248
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filin
Please return all correspondence concerning this matter to the following:
AHMAD SAADEH
(Name of Person)
SAADEH INC
(Name of Firm/Company)
1600 SOUTH DIXIE HWY SUITE A,B,C
(Address)
LAKE WORTH, FL 33460
(City/State and Zip Code)
For further information concerning this matter, please call:
AHMAD SAADEH at (561) 542-4156 (Area Code & Daytime Telephone Number)
(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

I, AHMAD SAADEH	, hereby resign as CEO		
	• • •	(Title)	
of SAADEH INC			
	ne of Corporation)		
P97000102248	, 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

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