

S43421

(Requestor's Name)

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(City/State/Zip/Phone #)

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T. BROWN

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Lisa E Shannon CPA PA  
(Name of Corporation)

**DOCUMENT NUMBER:** S 43421

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

Please return all correspondence concerning this matter to the following:

Lisa Shannon  
(Name of Person)

Lisa Shannon CPA PA  
(Name of Firm/Company)

1860 N Pine Island Rd #113  
(Address)

Plantation, FL 33322  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lisa Shannon at ( 954 ) 473-4120  
(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**

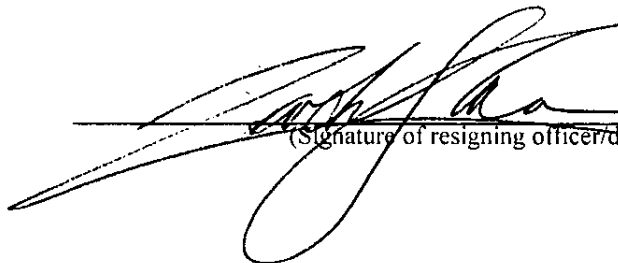
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I, Jordan Sharrow, hereby resign as Sec  
(Title)

of Nia E. Sharrow C.P.A., P.A.  
(Name of Corporation)

S-43421, 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