(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Submission Emily Hame)			
(Document Number)			
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COVER LETTER

TO: Amendment Section Division of Corporation	is .
SUBJECT: Web Results, In	C.
	(Name of Corporation)
DOCUMENT NUMBER:	98000034211
The enclosed Officer/Director	Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence	e concerning this matter to the following:
Michael A. Caputa	
(Name of	Person)
Web Results, Inc.	
(Name of Fire	n/Company)
440 E. Sample Road, Ste.	206
(Addi	ess)
Pompano Beach, FL 33064	
(City/State ar	d Zip Code)
For further information concern	ing this matter, please call:
Michael A. Caputa	at (954) 569-0201
(Name of Person	at (954) 569-0201 (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

Jonathan Grant	, hereby resign as	Director
-,	, nerecy resign as_	(Title)
of_ Web Results, Inc.		
(Name	e of Corporation)	
P98000034211 (Document Number, if known)	, a corporation organized un	der the laws of the State of
Florida		
	MAG	
	Signature of resigning officer/direct	tor)

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

06 JUL 13 PMID: 19

SECRETARY OF STATE