(Requestor's Name)			
•			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Dusiness Entity March)			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
·			

Office Use Only



700079847537

09/15/06--01014--003 **35.00

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Job Opportunity Business Specialists Inc. (Name of Corporation)
DOCUMENT NUMBER: 643871
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jamie Howington
(Name of Person)
Engel Accounting Inc.
(Name of Firm/Company)
1881 South Highway 17-92
(Address)
Longwood, FL 32750
(City/State and Zip Code)
For further information concerning this matter, please call:
Jamie Howington at (407) 772-4829 (Name of Person) (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, Wayne Page	, hereby resign as_	Secretary/Treasurer
		(Title)
of_ Job Opportunity Business Specialists		
(Name of Corpor	ation)	
(Document Number, if known), a corp	ooration organized un	der the laws of the State of
Florida	_	
Coch	of resigning officer direc	FILED OF SEP 15 PM ECRETARY OF S LLAHASSEE FLO
FILING	FEE IS \$35.00	4: 05 TATE IRIBA

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314