FlawDala2

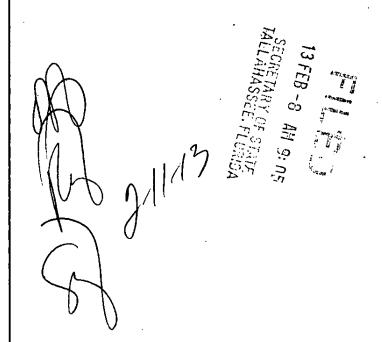
(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
, 				
Special Instructions to Filing Officer:				
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations						
SUBJECT: NNNET Advisors Inc (Name of Corporation)						
DOCUMENT NUMBER: F 1 2 0000 2122						
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
William J. MAZAR (Name of Person)						
NANET AZ UISOIS IN (Name of Firm/Company)						
11555 Central PKmy # 803 (Address)						
TAX FL. 32224 (City/State and Zip Code)						
For further information concerning this matter, please call:						
W: W: MAZAL at (904) 838-6188 (Name of Person) at (404) 838-6188 (Area Code & Daytime Telephone Number)						
Enclosed is a check for \$35.00 made payable to the Florida Department of State.						
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399						

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, _	William J. MAZAR	, hereby resign as	Director (Title)		
of_	NNNET Advisors (Name of Corp.)	INC.		,	
6	\200002\22, (Document Number, if known), a co	rporation organized under	the laws of the State of	of	
	Florida				
	(Signature	Llon). Maya e of resigning officer/director)	SECRETARY OF STATE TAPLAHASSEE, FLURIDI	13 FEB -8 AM 9: 05	

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