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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name

: INCORP SERVICES INC

Account Number : I20120000007 Phone

: (702)866-2500

Fax Number

: (702)866-2689

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

REGISTERED AGENT RESIGNATION NET ONE INTERNATIONAL, INC.

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Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER .

SUBJECT: NET ONE INTERNATIONAL, II	NC.
(Name of Corporation)	
DOCUMENT NUMBER: F9700003336	
The enclosed Resignation of Registered Agent for a Corporation and fee a	we submitted for filing
Please return all correspondence concerning this matter to the following:	
Wendy Hefley	
(Name of Person)	
Incorp Services, Inc.	
(Name of Firm/Company)	
3773 Howard Hughes Parkway, Suite 500S	
(Address)	
Las Vegas, N V 89169-6014	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Wendy Hefley for Incorp Services, Inc. at (866-2500	0 ext. 6904
(Name of Person) (Area Code & Daytime Tel	ephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the p	provisions of sections 60	7.0502(2), 617.0502(2), 607.150	9, or 617.1509,	
Florida Statutes.	the undersigned, Incor	p Services, Inc.	÷	
- (<i>V</i>		(Name of Registered Ag	gent)	
herehv resigns a	s Registered Agent for _	NET ONE INTERNATIONA	AL, ING.	
ticitory resigns as registered Agent for		(Name of Corporation	n)	
F970000033	36			
(Documen	t Number, if known)	_		
A copy of this re	esignation was mailed to	the above listed corporation at it	ts last known add	ress.
The agency is te	rminated and the office of	liscontinued on the 31st day afte	the date on which	ch
this statement is	filed	Services, Inc.		
		1		
	(Sign	nature of Resigning Agent)		
If signing on bel	nalf of an entity:			
	Wendy Hefl	ley .		
	(7	yped or Printed Name)		
	Authorized Representa	itive on behalf of Incorp Services	s. Inc.	
		(Capacity)		
		(
	\$87.50 - Activ \$35.00 - Adm	this document: ve corporation inistratively dissolved/voluntari	ly dissolved/	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314