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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ISAAC MATZ P.A., C.P.A.

Account Number: I20040000029 Phone : (305) 573-6640 Fax Number : (305)675~6200

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REGISTERED AGENT CHANGE

WORK RESOURCES INVESTMENT GROUP, LLC.

Certificate of Status	0
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Estimated Charge	\$35.00

J. SAULSBERRY **EXAMINER**

9 2011

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Fax Audit Number: 4110001260153

3055736648

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions	of section 608.416(2) or 6	i08.509, Florida Statutes	, the undersigned,		
	ISAAC MATZ PA	, h	ereby resigns as		
Registered Agent for	NETWORK RESC	DURCES INVESTM	ENT GROUP, LL	.C.	
	Name of Limited Lia	bility Company		*	
L090000					
Document Num	ber, if known				
A copy of this resignation	was mailed to the above li	sted limited liability con	npany at its last know	n address.	
	_	on the 31st day after the	e date on which this s	tatement is filed.	
If signing on behalf of an	entity:				
_	ISAA	C MATZ		2011 MAY SECRETO ALLAHA	
	Typed or i	Printed Name			
_		SAAC MATZ PA	·	TAR ASS	
	Спрак	ity		-6 SEX	1
	FILING FEES: \$ 85.00 Activ \$ 25.00 Admi	e limited liability comp nistratively dissolved/ v drawn limited liability c	any voluntarily dissolved company	PH 3: 15 OF STATE FLORIDA	E THE STATE

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

INHS17 (08/05)

Prepared by: Isaac Matz PA 2742 Biscayne Bivd Miami, FL 33137 Tel 305-573-6640 Fax 305-675-6200

Fax Audit Number: #110001760753