Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000282885 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

From:

Account Name : ROETZEL & ANDRESS

Account Number : I2000000121 Phone

: (239)649-6200

Fax Number

: (239)261-3659

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

COR AMND/RESTATE/CORRECT OR O/D RESIGN THE BEACON NETWORK, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Corporate Filing Menu

Help

12/2/2011

Electronic Filing Menu

https://efile.sunbiz.org/scripts/efilcovr.exe

(((H11000282885 3)))

COVER LETTER

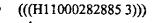
TO: Amendment Section Division of Corporations

SUBJECT: The Beacon N	Network, Inc.
DOCUMENT NUMBER:_	(Name of Corporation)
	or Resignation for a Corporation and fee are submitted for filing
Please return all corresponde	nce concerning this matter to the following:
Tae Shin	
(Name	of Person)
Roetzel & Andress	
(Name of F	im/Company)
420 S. Orange Avenue, 7	th Floor
(Ac	ddress)
Orlando, FL 32801	
(City/State	and Zip Code)
For further information conce	erning this matter, please call:
Tae Shin	at (407) 245-2452 on) (Area Code & Daytime Telephone Number)
(Name of Perso	on) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.0	0 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. Catalina Carrion	hereby resign as Director
	(Title)
of The Beacon Network, Inc.	
	ne of Corporation)
N110000001186	a corporation organized under the laws of the State of
(Document Number, if known)	
Florida	

(Italisa) (assigning officer/director)

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 Tallahaesce, Florida 32314 M DEC -2 MI H 09
SECRETARY OF STAT