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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : GUZMAN & GUZMAN, P.A.

Account Number : 120080000090 Phone : (305)670-1991 Fax Number : (305)670-1993

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

الكاريين المنتسم مسست والمتعهد بنيون المماميين والمسمون المستون المستون المستون والمتعارض والرزام المتعارض والمارات والماري

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN WIRELESS SUPPLIES INC. Certificate of Status Certified Copy Page Count

Estimated Charge

Electronic Filing Menu Corporate Filing Menu

Help

02

\$35.00

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT:_WIRELESS SUPPLIES INC.
(Name of Corporation)
DOCUMENT NUMBER: P00000052395
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
(Name of Person)
(Name of Firm/Company)
(Address)
(City/State and Zip Code)
For further information concerning this matter, please call;
(Name of Person) at ( )  (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  2661 Executive Center Circle  Tallahassee, FL 32301

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

CARLOS A. ZIME	KIVIAN, hereby resign as PSIU	
		(Title)
. WIRELESS SU	JPPLIES INC	
۱۱ <u></u>	me of Corporation)	,
P00000052395 (Document Number, if known)	, a corporation organized under the laws of	of the State of
FLORIDA		
	(Signature of resigning efficer/director)	2019 JUL 15" AM 10: 28 SECRETARY OF STATE FALL AHASSEE, FLORID,