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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

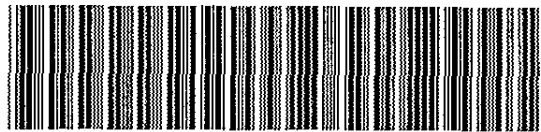
(Business Entity Name)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2002 DEC 20 PM 2:37

Officer Resignation
LFS
1-6-2003

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 2 FEMS, INC.
(Name of Corporation)

DOCUMENT NUMBER: UNKNOWN

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

LISA M. WINNE
(Name of Person)

2 FEMS, INC.
(Name of Firm/Company)

325 CALUSA ST
(Address)

KEY LARGO, FL 33037
(City/State and Zip Code)

For further information concerning this matter, please call:

LISA M WINNE at (305) 453-1460
(Name of Person) (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**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2002 DEC 20 PM 2: 37

I, LISA M. WINNE, hereby resign as VICE PRESIDENT
(Title)

of 2 FEMS, INC.
(Name of Corporation)

UNKNOWN, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.

Lisa M. Winne
(Signature of resigning 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
Tallahassee, Florida 32314