

PO 3000076845

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

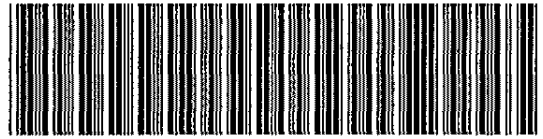
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*010  
TS/10/15/04*

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** TECHSTARE INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** PO3000076845

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

EARL HARVARD  
(Name of Person)

TECHSTARE INC.  
(Name of Firm/Company)

1841 HWY 179  
(Address)

BONIFAY FL. 32425  
(City/State and Zip Code)

For further information concerning this matter, please call:

EARL HARVARD at (850) 956-5181  
(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  
04 OCT 15 PM 1:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, William L. HARVARD, hereby resign as PRES. / TREASURER  
(Title)

of TECH STARE, INC  
(Name of Corporation)

P03000076845, a corporation organized under the laws of the State of  
(Document Number, if known)  
FLORIDA

William Harvard  
(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