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CURRIARY OF STATE

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## TRANSMITTAL LETTER

SUBJECT: TECHSTARE INC. (Name of Corporation)
DOCUMENT NUMBER: P03000076845
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)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

of TECH STARE. INC

(Name of Corporation)

Po300076845

(Document Number, if known)

FLORIDA

(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