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(Requestor's Name)

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(Business Entity Name)

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Pomcor Acquisitions, Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** P04000024385

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

Please return all correspondence concerning this matter to the following:

**Graham Wellington**

(Name of Person)

(Name of Firm/Company)

**1641 NW 10th Street**

(Address)

**Boca Raton, FL 33486**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Graham Wellington**

(Name of Person)

at ( **561** ) **901-7813**

(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

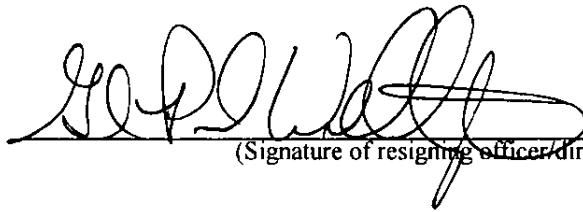
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Graham P Wellington, hereby resign as Vice Pres/Asst Sec  
(Title)

of Pomcor Acquisitions, Inc.  
(Name of Corporation)

P04000024385, a corporation organized under the laws of the State of  
(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

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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