## 70400043687

(Requestor's Name)					
(Address)					
/ (Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





100076667111

FILED

06 JUL -5 PM 4: 06

SECRETARY OF STATE
FALLAHASSEE, FLORID

07/05/06--01026--010 \*\*35.00

Ps 7/10/06

## **COVER LETTER**

Division of Corporations
SUBJECT: Winjey Plastering & DRYWALL, Inc. (Name of Corporation)
DOCUMENT NUMBER: PO4000043687
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
NECKER CHERICLET (Name of Person)
(Name of Firm/Company)
1769 NE 168 ST (Address)
N.M.B FL 33162 (City/State and Zip Code)
For further information concerning this matter, please call:
NECKER CHERICLET at (305) 450 5289 (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
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION 06 JUL -5 PM 4: 07

SECRETARY OF STATE TALLAHASSEE, FLORIDA

, NECKER	CHERICLET	, hereby resign	as	REASURER
				(Title)
of Winjey	Plastering &	DRYWALL.	Ina	- <i>i</i> .
<u> </u>	(Name of Corp	oration)		
P0400004 (Document Numb		rporation organize	d under t	the laws of the State of
Florida	·	•		

/.

nature 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