P04000103345

| (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: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |





300121190013

03/31/08--01013--014 **35.00

OR MAR 31 AM II: 24 SECRETARY OF STATE TALL AHASSEE, FLORIDA

01) Resign. 414/08

COVER LETTER

| SUBJECT: For Our Wireless kids Inc (Name of Corporation) |
|----------------------------------------------------------------------------------------------|
| DOCUMENT NUMBER: <u>P04000103345</u> |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing |
| Please return all correspondence concerning this matter to the following: |
| John Corcoran (Name of Person) |
| (Name of Firm/Company) |
| 2901 A W HILLSborough Ave |
| Tampa FL 33614 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Ohn Corcoran at (813) 879 8699 (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 Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| , Davi | d Ebner | , hereby resign as | Director (Title) | |
|--------|---------------------------|--------------------------------|------------------|-----------|
| of Fo | r Our Wire (Name of Corpo | eless kids, | Inc. | , |
| | (03345 .a cor | | | |
| | • | | | |
| | 0 4. | | ĀŞ. | 2 |
| 7 | X July (Signature | of resigning officer/director) | LAHAS | 08 HAR 31 |
| | | | <u> </u> | - MII: 24 |
| | | | ORI | : 24 |

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