

PO4000118306

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TALLAHASSEE, FLORIDA

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C. MUSTAIN

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TO: Amendment Section
Division of Corporations

SUBJECT: LPLW, INC
(Name of Corporation)

DOCUMENT NUMBER: P04000118306

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

Please return all correspondence concerning this matter to the following:

JOSEPH M. BOAN
(Name of Person)

(Name of Firm/Company)

3220 NORTH FLAGLER DRIVE
(Address)

WEST PALM BEACH, FL 33407
(City/State and Zip Code)

For further information concerning this matter, please call:

JOSEPH BOAN at (561) 371 1772
(Name of Person) (Area Code & Daytime Telephone Number)

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

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

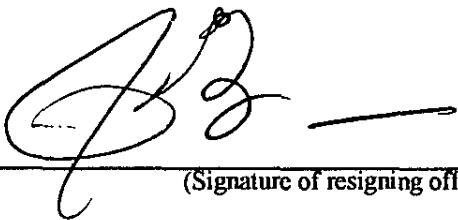
Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JOSEPH M. BOAN, hereby resign as PRESIDENT / DIRECTOR
(Title)

of LPLW, INC.
(Name of Corporation)

P04000118306, a corporation organized under the laws of the State of
(Document Number, if known)


(Signature of resigning officer/director)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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