## P05000057810

(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:  Laure Haler  Contact of the Contact of t
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SECRETARY OF STATEONS
OIVISION OF CORPORATIONS
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Working Networks Inc. (Name of Corporation)
DOCUMENT NUMBER: PO 5000057810
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jay Soshnick (Name of Person)
(Name of Firm/Company) 8016 Wiles Rd
(Address)  Cora Sings FL 33067  (Cit/State and Exp Code)
For further information concerning this matter, please call:
Lave / Adler at (56/-) 2/2-5/90 (Name of Person) (Area Code & Daytime Telephone Number)
Comment of the control of the contro

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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

TO:

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

of Working Netaoks Inc.  (Name of Corporation)	/Agent
(Name of Corporation)  Posoco 578/O, a corporation organized under the laws of the State (Document Number, if known)  Florida.	ate of
(Signature of resigning officer/director)	SECRETARY OF STATE OF STATE OF CORPORATE OF

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