785000/27719

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	· #)
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COVER LETTER

Division of Corporations
SUBJECT: Wireworker Inc. (Name of Corporation) DOCUMENT NUMBER: PO 5000127719
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Christopher Ripa (Name of Person)
Wireworker Inc (Name of Firm/Company)
1 Address (Address) Lack Sonville Fl. 32246 (City/State and Zip Code)
For further information concerning this matter, please call: Christopher Ripa at (904) 237-8245 (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

1, Theresa Hanbury, hereby resign as Secr	etary (Title)	_
of Wireworker, Inc. (Name of Corporation)		,
Posoco (27719 , a corporation organized under the laws of (Document Number, if known)	the State of	
-lorida.	2019 SE TAL	
	2009 APR 13 SECRETARY TALLAHASSE	
(Signature of resigning officer/director)	AN 8: 21 OF STATE	

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