Paacoo19659		
(Requestor's Name) (Address) (Address)	100079948321	
(City/State/Zip/Phone #)	U9,/26/0601017003 ¥¥35.00	
Certified Copies Certificates of Status	D6 SEP TALLAHAS	
Office Use Only	FILED 06 SEP 26 PH 2: 28 SECRETARY OF STATE FALLAHASSEE FLORIDA	

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: CYTHETIC TRANSMISSIONS, INC

(Name of Corporation)

DOCUMENT NUMBER: P06000079659

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

Please return all correspondence concerning this matter to the following:

MOHAMMED N. JANJUA

(Name of Person)

CYHETIC TRANSMISSION, INC.

(Name of Firm/Company)

5475 SOUTH ORANGE BLOSSOM TRAIL

(Address)

ORLANDO

FL 32829

(City/State and Zip Code)

For further information concerning this matter, please call:

CYNTHIA SANCHEZ

(Name of Person)

at (<u>407</u>)<u>812-8474</u> (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, MOHAMMED NAVAID JANJUA	, hereby resign as PF	RESIDENT (Title)
of CYTHETIC TRANSMISSIONS		
(Name o	f Corporation)	
P06000079659 (Document Number, if known)	, a corporation organized under the laws of the State of	
FLORIDA	· _	
FI Make checks payable to	gnature of resigning officer/director) LING FEE IS \$35.00 Florida Department of State Amendment Section Division of Corporations P.O. Box 6327 Fallahassee, Florida 32314	FILED 06 SEP 26 PM 2: 28 TALLAHASSEE FLORIDA and mail to:

· <u>- - - - - - -</u> -

_ _ _