P06000140411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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off Resign
C.COULLIETTE
JAN 06 2011
EXAMINER

# COVER LETTER

**TO:** Amendment Section
Division of Corporations

**SUBJECT:** Wisebuys, Inc.
(Name of Corporation)

**DOCUMENT NUMBER:** P06000140411

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

Please return all correspondence concerning this matter to the following:

Thomas W. Scozzafava
(Name of Person)

Wisebuys, Inc.
(Name of Firm/Company)

213 West Main Street, PO Box 725
(Address)

Sackets Harbor, NY 13685
(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas W. Scozzafava at ( 315 ) 646-7101
(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, Thomas W. Scozzafava, hereby resign as Chairman & President
(Title)

of Wisebuys, Inc.
(Name of Corporation),

P06000140411
(Document Number, if known), a corporation organized under the laws of the State of

Florida.

Thom. W. Scozz
(Signature of resigning officer/director)

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**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