P13000054/82

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
		j

Office Use Only



600264242386

09/22/14--01028--017 **35.00

14 SEP 22 AH ID 50

0D/RC5 10 9.3D.14

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: WK Payroll, Inc. (Name of Corporation)
DOCUMENT NUMBER: P13000054182
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Michael Monte
(Name of Person)
(Name of Firm/Company)
PO Box 141717
(Address)
Coral Gables FL 33114
(City/State and Zip Code)
For further information concerning this matter, please call:
Michael Monte (Name of Person) at (305) 6481009 (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, Michael Monte	, hereby resign as Pres and COO
of WK Payroll, Inc.	(Title)
(Nan	ne of Corporation)
P13000054182 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	
	(Signature of resigning officer/director)
	E CHARLES THE

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