## Por Phone #

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## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

CR2E031(7/97)

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(Corporation Name)		(Document #)	-10/01/0101054008 *****35.00 *****35.00
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NEW FILINGS		<u>AMENDMENTS</u>	
Profit Not for Profit Limited Liability Domestication Other		Amendment Resignation of R.A., O Change of Registered A Dissolution/Withdrawa Merger	Agent of Salah
OTHER FILINGS		REGISTRATION/QUAL	IFICATION O
Annual Rep Fictitious N		Foreign Limited Partnership Reinstatement Trademark Other	IFICATION OF SPO

## OFFICER / DIRECTOR RESIGNATION

I, Mark D. Wilson, hereby resign as Officer (Title)	¿ Director
of IE Inc. (Name of Corporation)	
a corporation organized under the laws of the State of	
and affirm that the corporation has been notified in writing of the resignation.	žas O
(Signature of resigning officer/director)	CRETARY
	AHII: 01 OF STATE E. FLORIII

## FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314