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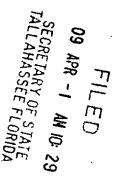
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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: One Paper, Inc., (Name of Corporation)
DOCUMENT NUMBER: P98000019358
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following: (Name of Person) (Name of Firm/Company) (Name of Firm/Company) (Address)
(Address) (City/State and Zip Code) For further information concerning this matter, please call: (Name of Person) (Address) (City/State and Zip Code) (Address) (City/State and Zip Code) (Address) (Address) (Address) (Address) (Address) (Address) (Address)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, JOENNE , hereby resign as PLE	sident, Secretar
of	,
(Document Number, if known)	aws of the State of
Florida	
	09 SEC
(Signature of resigning officer/director)	F I APR : RETAR AHAS
	LED NY OF STAI SEE FLORII
FILING FFF IS \$35.00	IO: 29 TAIE DRIDA

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314