

P99 600012031

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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10/13/04--01052--001 **35.00

FILED
04 OCT 13 PM 4:29
CLERK OF STATE
TALLAHASSEE, FLORIDA

61D
1510/12/04

22 September 2004

mailed 10/4/04

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

re: Wolf Imaging, Inc.
an inactive Florida corporation
Document Number P99000012031
FEI Number 593561529

This forwards my resignation from the Board of Directors of the above corporation. While there are other issues driving this decision, it was the responsibility of the Chairman of the Board to insure that the corporate status was kept active.

As documented in writing, I refused to participate in what I was directed by the Chairman to do:

i wish i was leaving with a cleaner plate but such is life. so just to make it easier for you, here's where we are on things:

monday:

- *please contact the corporate filing office*
 - *my thought was to say that we sent it in but notice that the check was never cashed*
 - *i was out of town and asked about it when i returned and you are just confirming everything is all set*
 - *i know you can handle this better than me*

In 2001, upon being nominated to the Board of Directors, I already had to handle the issue that the appropriate paperwork was not filed on time by either the Chairman or a previous Board member.

I would appreciate a confirmation of this resignation being sent to my attention at P.O. Box 17392, Jacksonville, FL 32245.

Thank you for your attention to this matter.

Best regards,


Laurel Ley Wright

cc: Lamar Winegeart, Esq.

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Way Imaging, Inc.
(Name of Corporation)

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Laurel Lay Wright
(Name of Person)

Way Imaging, Inc.
(Name of Firm/Company)

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

Laurel Lay Wright at (904) 565-1429
(Name of Person) (Area Code & Daytime Telephone Number)

*see
cover
letter*

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED

04 OCT 13 PM 4:29

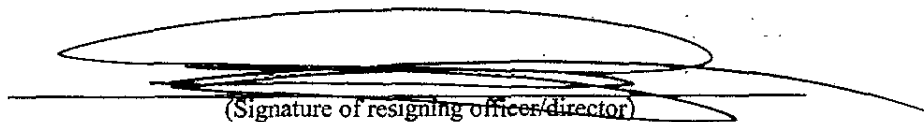
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Laurel Ley Wright, hereby resign as Vice President
(Title)

of Wolf Imaging, Inc.
(Name of Corporation)

999000012031, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

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