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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: WIPLEX TEVERM EUROUR CRP. (Name of Corporation)
DOCUMENT NUMBER: PG9 NVV 66954
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filin
Please return all correspondence concerning this matter to the following:
C, WRITH
(Name of Person)
(Name of Firm/Company)
168 SE 1 ST #1100-
MVAm/ Ry 33/3/
(City/State and Zip Code)
For further information concerning this matter, please call:
Tquand at 315 B5P6700 - (Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607,1509, or 617.1509,	
Florida Statutes, the undersigned, OCIVIA WRITA	
hereby resigns as Registered Agent for WIPUT TECHN EVALUATION	VRP
P99000 66954-	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last known address.	
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.	
(Signature of Resigning Agent)	
If signing on behalf of an entity:	
CECIUM ZURIM (Typed or Printed Name) TALLAHASS TALLAHASS	
(Compaits)	1
Fee for filing this document:	,

Fee for filing this document: \$87.50 - Active corporation

2835.00 - Administratively dissolved/voluntarily dissolved/withdrawn corporation

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