

P04000046323

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

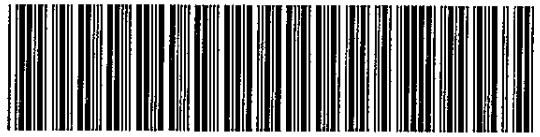
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06 JAN -5 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

October 19, 2005

OSWALDO OROZCO
CNCIS, INC.
13818 S.W. 28TH STREET
MIRAMAR, FL 33027

SUBJECT: CNCIS, INC.
Ref. Number: P04000046323

We have received your document for CNCIS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PHOTO COPIES ARE NOT ACCEPTABLE.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 605A00063581

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CNCIS INC.
(Name of Corporation)

DOCUMENT NUMBER: P04000046323

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

SHANE SCANLON
(Name of Person)

(Name of Firm/Company)

11880 STATE ROAD 84 SUITE D14
(Address)

DAVIE, FL 33325
(City/State and Zip Code)

For further information concerning this matter, please call:

SHANE SCANLON at (954) 888-1024
(Name of Person) (Area Code & Daytime Telephone Number)

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

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


**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, SHANE SCANLON, hereby resign as PRESIDENT
(Title)

of CNCIS INC.
(Name of Corporation)

P04000046323, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILED
JAN -5 11 10 00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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