

P04000046323

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

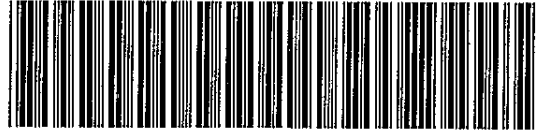
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TALLAHASSEE, FLORIDA

**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:

KENNETH M. SALZMAN  
(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:

KENNETH M. SALZMAN 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, KENNETH M. SALZMAN, hereby resign as VICE 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  
06 JAN -5 AM 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