

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates of Status	
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JORES 1100 80 MILL

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: ALL SOURCE CONSTRUCTION, INC. (Name of Corporation) DOCUMENT NUMBER: P1600034805
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JAMES EDWARD VAN REENEN (Name of Person)
(Name of Firm/Company)
1121 SEMINOLE DRIVE (Address)
INDIAN HARBOUR BEACH, FL 32937 (City/State and Zip Code)
For further information concerning this matter, please call:
TAMES EDWARD VAN REENEN at (321) 508 - 0862 (Name of Person) (Area Code & Daytime Telephone Number)
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 2661 Executive Center Circle Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, JAMES EDWARD	ANREENEN, hereby resign as	CEO (Title)
of ALL Source C	CONSTRUCTION, INC.	05/31/2017
P16000034805 (Document Number, if known)	, a corporation organized under t	he laws of the State of
FLORIDA		
<u> </u>	(Signature of resigning officer/director)	*** T SET 23

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