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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: COLUSA Contracting Inc (Name of Corporation)
DOCUMENT NUMBER: F0400000 6633
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
XIMENA LOGREIRA (Name of Person)
COLUSH Contracting Inc. (Name of Firm/Company)
1791 W. Lymsden Rd #317 (Address)
BRANDON FL 33511 (City/State and Zip Code)
For further information concerning this matter, please call:
Susan Cowin at (813) 436-1164 (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
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

i, <u>Susan E Cowi</u>	1, hereby resign as_	Vice f	residen (Title)	<u>+</u>
of COLUSH CON- (Name of	TRACTING Corporation)	INC		 ,
F0400006633 (Document Number, if known)	a corporation organized un	der the laws of	the State of	
Delaware.				
		:	OS DEC-	176
Juse	en E Cowr nature of resigning officer/direct	4	-1 PH	
(Sig	mature of resigning officer/uneco	ioi j	FLORIE FLORIE	

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