

F190000004824

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

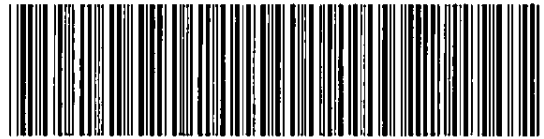
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

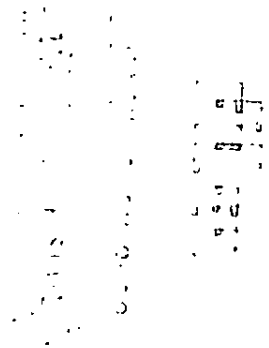
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FM
2-14-25

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: One Source Restoration & Building Service Inc
(Name of Corporation)

DOCUMENT NUMBER: F19000004824

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Greg Cirignano
(Name of Person)

One Source Restoration & Building Service Inc
(Name of Firm/Company)

301 W. Platt Street, #A388
(Address)

Tampa, FL 33606
(City/State and Zip Code)

For further information concerning this matter, please call:

Greg Cirignano at (609) 350-5999
(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

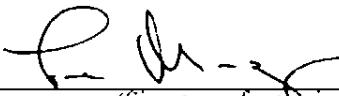
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Les Mouzon, hereby resign as CFO, EVP & Secretary
(Title)

of One Source Restoration & Building Service Inc
(Name of Corporation)

F19000004824, a corporation organized under the laws of the State of
(Document Number, if known)

New Jersey


(Signature of resigning officer/director)

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