L80919

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CONSTRUCTION MEDIX, INC.
(Name of Corporation)

DOCUMENT NUMBER: L80919

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

Please return all correspondence concerning this matter to the following:

HERSCHEL T. BLAKE
(Name of Person)

CONSTRUCTION MEDIX, INC.
(Name of Firm/Company)

3550 SW ST. LUCIE SHORES DR.
(Address)

PALM CITY FL 34990
(City/State and Zip Code)

For further information concerning this matter, please call:

DANIEL C. BLAKE at (772) 223-7755
(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
409 E. Gaines Street
Tallahassee, FL 32399

CR2E044(11/02)

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

I, HERSCHEL T. BLAKE, hereby resign as VICE PRESIDENT (Title)

of CONSTRUCTION MEDIX, INC. (Name of Corporation),

L80919 (Document Number, if known), a corporation organized under the laws of the State of FLORIDA.

Herschel T Blake
(Signature of resigning officer/director)

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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