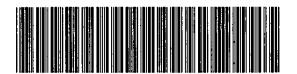
## P01000026170

(Requestor's Name)		
(Address)		
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
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## **COVER LETTER**

SUBJECT: SOUTH CAPITAL CONSTRUCTION, INC (Name of Corporation) P01000026170 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: PLANES, WILLIAM II (Name of Person) (Name of Firm/Company) 32801 US HWY 19 N (Address) PALM HARBOR, FL 34684 (City/State and Zip Code) For further information concerning this matter, please call: WILLIAM PLANES II (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations Post Office Box 6327 Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

## OFFICER AND DIRECTOR RESIGNATION

I, WILLIAM PLANES II, hereby resign as Treasurer and Director, as of November 17, 2008,

of SOUTH CAPITAL CONSTRUCTION, INC., which was given document Number: P01000026170,

a corporation organized under the laws of the State of Florida.

WILLIAM PLANES II

STATE OF FLORIDA COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 18 day of December, 2008, by WILLIAM PLANES II, who is personally known to me or who has produced a Drivers License as identification.

Printed Name:

Notary Public

My Commission Expires: Serial Number: DD 453

ROSA E. CASEY MY COMMISSION # DD 455845 EXPIRES: July 31, 2009