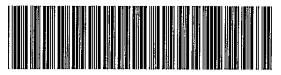
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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)
PICK-UP WAIT	MAIL
(Business Entity Name)
(Document Number)	
Certified Copies Certificates of	f Status
Special Instructions to Filing Officer:	





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SECRETARY OF STATE
ALLAHASSEE, FLORIEN

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: INTERNATIONAL RECOVERY SERVICE, INC.
(Name of Corporation)
DOCUMENT NUMBER: P01000054753
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DAVID G. DRESLIN
(Name of Person)
DRESLIN FINANCIAL SERVICES
(Name of Firm/Company)
7985 113TH STREET, SUITE 220
(Address)
SEMINOLE, FLORIDA 33772
(City/State and Zip Code)
For further information concerning this matter, please call:
DAVID G. DRESLIN at (727) 393-7439 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

CR2E046(11/02)

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

, , <u>*</u>*

Pursuant to the provisions of sec	ctions 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned	d, DRESLIN FINANCIAL SERVICES, INC. (Name of Registered Agent)
	(waine of Registered Agent)
hereby resigns as Registered Ag	ent for INTERNATIONAL RECOVERY SERVICE, INC.
	(Name of Corporation)
P01000054753	
(Document Number, if knows	1)
A copy of this resignation was r	nailed to the above listed corporation at its last known address.
The agency is terminated and th this statement is filed.	(Signature of Designing Agent)
If signing on behalf of an entity:	SSE P. T.
DAVID G. 1	DRESLIN
	(Typed or Printed Name)
PRESIDEN	JT
	(Capacity)

Fee for filing this document:

\$87.50 - Active corporation
\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314