P01000077543

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COVER LETTER

Division of Corporations
SUBJECT: Construction Services Associates (Name of Corporation)
DOCUMENT NUMBER: 593736146
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
(Name of Person)
(Name of Firm/Company) (Name of Firm/Company)
4617 Puttura (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (50 4) 33 8 7209 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO: Amendment Section



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 12, 2006

RENEE HARKNESS 4617 PRYTANIA ST. NEW ORLEANS, LA 70115

SUBJECT: CONSTRUCTION SERVICES ASSOCIATES, INC.

Ref. Number: P01000077543

We have received your document for CONSTRUCTION SERVICES ASSOCIATES, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6878.

Alan Crum Document Specialist

Letter Number: 506A00044772

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1,	hereby resign as pusuling	nt itle)		
of	Construction Survices associates # 59:	<u>373</u>	014	6
	, a corporation organized under the laws of the (Document Number, if known)	State	of	
	Houdá	FALLAH	06 AUG -	1
		TARY OF ASSEE, I)-7 AM	
	(Signature of resigning officer/director)	STATE	111:27	D

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