## P02000033296

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone #	<del>¥)</del>
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates c	of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporatio	ns
SUBJECT:RESC	
	(Name of Corporation)
DOCUMENT NUMBER:	P02000033296
The enclosed Officer/Director	Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence	ce concerning this matter to the following:
PAUL HOLSTEIN	
(Name of Perso	n)
RESQPC.COM, INC. (Name of Firm	10
(Name of Firm	1/Company)
601 E. SAMPLE ROAD	
(Address)	
POMPANO BEACH, FL 3300	
(City/State an	d Zip Code)
For further information concer	rning this matter, please call:
ROBERT WILCOX	(954) 946-3433
(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:	Street Address:
Amendment Section	Amendment Section

Division of Corporations

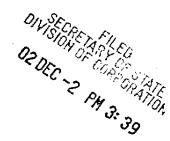
409 E. Gaines Street Tallahassee, FL 32399

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



I,	PAUL HOLSTEIN	, hereby resign as Officer Director, President and Treasurer (Title)
of	RESQPC.CON	(Name of Corporation)
	P02000033296 (Document Number, if known)	, a corporation organized under the laws of the State of Florida.

(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