

PD3000035758

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

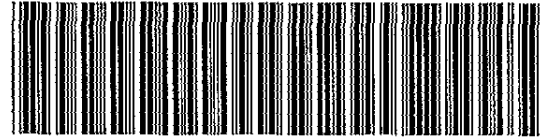
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

OD/Res
10 2.9.06



800065247088

02/06/06--01034--013 **35.00

FILED
06 FEB -6 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Complete Service Contractors, Inc
(Name of Corporation)

DOCUMENT NUMBER: P03000035758

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

Please return all correspondence concerning this matter to the following:

Lilia Tome
(Name of Person)

Complete Service Contractors, Inc
(Name of Firm/Company)

1370 Washington Ave, #212
(Address)

Miami Beach, FL 33139
(City/State and Zip Code)

For further information concerning this matter, please call:

Aurora Linages Zvalich at (305) 338-6692
(Name of Person) (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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Aurora Linares-Zvalich, hereby resign as Senior Vice-President
(Title)

of Complete Service Contractors, Inc.,
(Name of Corporation)

P03000035758, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

FILED
06 FEB -6 AM 10:00
SECRETARY OF STATE
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