

PD4000129548

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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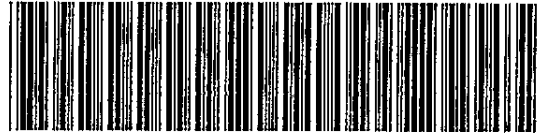
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CONTRACTORS SOLUTIONS Group of Florida
(Name of Corporation)

DOCUMENT NUMBER: P 04000129548

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

Please return all correspondence concerning this matter to the following:

MARTIN W. MCELIMON
(Name of Person)

(Name of Firm/Company)

P.O. BOX 42
(Address)

TERRA CEIA FL 34250
(City/State and Zip Code)

For further information concerning this matter, please call:

MARTIN MCELIMON at (727) 647-3898
(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:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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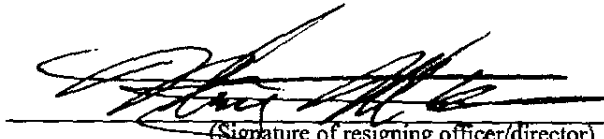
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, MARTIN W. MECHIMON, hereby resign as DIRECTOR
(Title)

of CONTRACTOR SOLUTIONS GROUP OF FLORIDA,
(Name of Corporation)

P04000129548, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.


(Signature of resigning officer/director)

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05 JAN 21 AM 9:45
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