

P04000153140

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

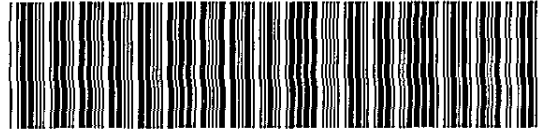
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Received on 2-18-05

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700045617377

02/21/05--01029--019 **87.50

2005 FEB 18 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

R.A. Resignation
LFS
2-25-05

Phil Perry
Phone Number 954-445-3100
PO Box 880997
Port St. Luice, Florida
34988- 0997

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida
32314

Reference: Phil Perry/Construction Services of Fla. USA, Inc.

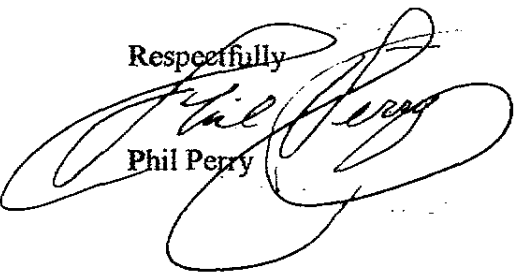
To Whom It May Concern

Enclose you will find my resignation as president of Construction Services of Fla. USA Inc., as president with the appropriate transmittal letter executed and my resignation as registered agent.

Inc. closed my check Number 522 in the amount of \$87.50 and an additional check Number 521 in the amount of \$35 as required by your department.

Should for any reason you need to communicate with me, I can be reached by phone at 954-445-3100. I further would appreciate if you would give me a written confirmation of the resignations enclosed. I would appreciate if you would direct all correspondence to P.O. Box 80997, St. Luice West, Florida, 34988-0997.

Respectfully


Phil Perry

FILED

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

2005 FEB 18 PM 12:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, Phil Perry

(Name of Registered Agent)

hereby resigns as Registered Agent for Construction Service of Fla. USA, Inc.

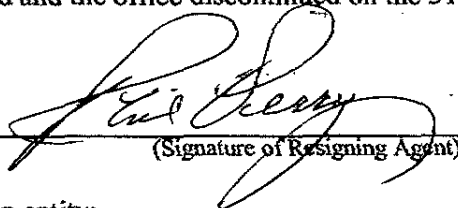
(Name of Corporation)

Two

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.


(Signature of Resigning Agent)

If signing on behalf of an entity:

Phil Perry

(Typed or Printed Name)

President

(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