

P04000172819

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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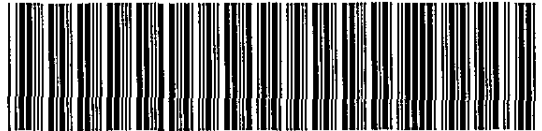
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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*O/D resig.*

*vs  
11/10*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** RECCS Co  
(Name of Corporation)

**DOCUMENT NUMBER:** P04000172819

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

Please return all correspondence concerning this matter to the following:

ERNEST HARRIS III  
(Name of Person)

RECCS Co.  
(Name of Firm/Company)

10000 TIMBER LN  
(Address)

ORLANDO, FL 32825  
(City/State and Zip Code)

For further information concerning this matter, please call:

ERNEST HARRIS III at (407) 529-0000  
(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**

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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I, ANTHONY M CERCEO, hereby resign as SR PARTNER  
(Title)

of RECCS CO, DBA RECCS  
(Name of Corporation)

FD4000172819, a corporation organized under the laws of the State of  
(Document Number, if known)

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