P05000143101

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
(Oity/State/Zip/Filone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



500137604135

11/10/08--01050--013 **35.00

08 NOV TO PHIZ: 30

COVER LETTER

Division of Corporations
SUBJECT: NORTH STAR BUILDING SERVICES, INC. (Name of Corporation) DOCUMENT NUMBER: P05000 1 4310 1
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
(Name of Person)
NORTHSTAR BUILDING SERVICES, INC. (Name of Firm/Company)
5 PINE KNUL LANE (Address)
LAKE WYLIE, SC. 29710 (City/State and Zip Code)
For further information concerning this matter, please call:
DONNA O'BRIEN at (508) 524-3292— (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

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, _	JOHN F. O'BRIEN, hereby resign as Pres., Secy,	Tree	₹S.	_
of_	NORTHSTAR BUILDING SERVICES, INC. (Name of Corporation)			.,
	Po5000 143 101, a corporation organized under the laws of the St	tate of	f	
	FLORI DA-		08 NOV 10	Tarana.
	(Signature of resigning officer/director)	ARY OF STA	10 PH 12: 31	B
	(Signature of resigning officer/uncetor)		30	

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