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(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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TBGWN 11-17-11

COVER LETTER

Amendment Section Division of Corporations

TO:

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SUBJECT: ConStructured Cabling Group, Inc.					
(Name of Corporation)					
DOCUMENT NUMBER: PROPOTOTO 96486					
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing					
Please return all correspondence concerning this matter to the following:					
Carlos Gonzalez					
(Name of Person)					
ConStructured Cabling Group, Inc.					
(Name of Firm/Company)					
2004 Mealow RS (Address)					
West Palm Beach fr 33-106 (City/State and Zip Code)					
For further information concerning this matter, please call:					
Carlos Gonzalez at (561) 653-1470 (Area Code & Daytime Telephone Number)					
(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

TALLAHASSEE MORIES

I.	Eduardo M. Aleman	, hereby resign as_	Director	10
-, _		,, 100.g.i. u	(Title)	
of	ConStructured Cabling Gro	oup Inc		
-	(N	ame of Corporation)		
2	(Document Number, if known)	, a corporation organized un	der the laws of the State of	
FI	orida			
				
	_			
		(Signature of resigning officer/direct		
		(Signature of resigning officer/direct	(OI)	

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