

P14000088988

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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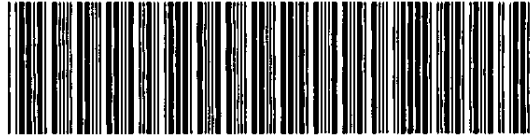
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
15 AUG -5 AM 9:37

AUG 7 2015
C LEWIS

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Contractor Solutions 360 Inc
(Name of Corporation)

DOCUMENT NUMBER: P14000088988

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

Please return all correspondence concerning this matter to the following:

Ronald Mascitti
(Name of Person)

Contractor Solutions 360 Inc
(Name of Firm/Company)

14050 Conyers St
(Address)

Spring Hill FL 34608
(City/State and Zip Code)

For further information concerning this matter, please call:

Ronald Mascitti at (813) 598 5900
(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
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

15 AUG -5 AM 9:37

I, Wenefrada Enere, hereby resign as VS.
(Title)

of Contractor Solutions 360 Inc
(Name of Corporation)

P14000088988, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Wenefrada Enere
(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