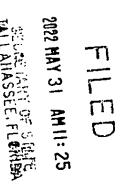
## P18CCC07445C

Office Use Only



700388609987

05/31/33--01639--003 \*\*35.00



JK

## TRANSMITTAL LETTER

SUBJECT: FULL SERVICE RS, CORP.	(Name of Corporation)
DOCUMENT NUMBER: P18000074450	(Nume of Corporation)
The enclosed Officer/Director Resignation	n for a Corporation and fee are submitted for filing.
Please return all correspondence concernir	ng this matter to the following:
HORTENCIA CANAS	
(Name of Person)	
N/A	
(Name of Firm/Company)	)
464 WESTREE LN	
(Address)	
PLANTATION, FL 33324	
(City/State and Zip Code)	<del></del>
For further information concerning this ma	atter, please call:
HORTENCIA CANAS	954 203-3701
(Name of Person)	at (954 203-3701 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payal	ble to the Florida Department of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Amendment Section Division of Corporations

TO:

P.O. Box 6327

Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

HORTENCIA CANAS	VICE PRESIDENT, hereby resign as
	(Title)
FULL SERVICE RS, CORP.	
(Nar	ne of Corporation)
P18000074450	a corporation organized under the laws of the State of
(Document Number, if known)	· · ·
FLORIDA	
	<del></del> :

(Signature of resigning officer/directo

## 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 SCURLIARY OF SHARE

TILTU