

PI8000084991

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

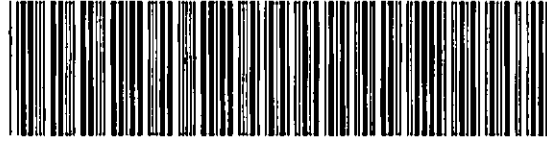
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

JUN 14 2019

C. King

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Construction Solutions Management Group, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P18000084991

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

Please return all correspondence concerning this matter to the following:

Michelle Davis

(Name of Person)

Construction Solutions Management Group, Inc.

(Name of Firm/Company)

610 NE 15th Pl

(Address)

Boynton Beach, FL 33435

(City/State and Zip Code)

For further information concerning this matter, please call:

Michelle Davis

561 396-3177

at ( )

(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

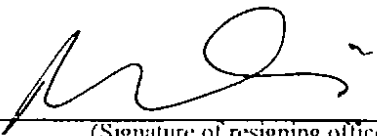
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Michelle Davis, hereby resign as President  
(Title)

Construction Solutions Management Group, Inc.  
of \_\_\_\_\_  
(Name of Corporation)

P18000084991

\_\_\_\_\_, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida  
\_\_\_\_\_

  
\_\_\_\_\_  
(Signature of resigning officer/director)

**FILED**  
2019 JUN 10 PM 1:54  
SECRETARY OF STATE  
TALLAHASSEE, FL

**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