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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO:	Amendment Section
	Division of Corporations

SUBJECT: NES	OURCE		f Corporation)		twe.
	Λ	•	• •		
DOCUMENT NUMBER:	P 98	00 00 4	3971	 	
The enclosed Officer/Direct	or Resignati	ion for a Coi	poration and	fee are submitted	for filing.
Please return all corresponde	ence concer	hing this ma	tter to the foll	owing:	
		_		_	
Richans Williams	ms				
Richano Williamo (Namo	of Person)				
At The Account	Hy Sen.	ice In	ح_		
(Name of	Firm/Compa	ny)			
5006 Trouble (auh	Pd. 5	rite 129		
(A	ddress)				
New Bort Rich (City/State	rey, Fl	2 346:	-2		
(City/State	and Zip Co	de)			
For further information con	erning this	matter, plea	se call:		

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

(Name of Person)

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

(Area Code & Daytime Telephone Number)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, _	Gany T Jullian, Sa, hereby resign as Pusidnt and Di	<u>n</u> eta
of_	RESOURCE CONSTRACTION Services Dre (Name of Corporation)	_,
	P98000 43 971 , a corporation organized under the laws of the State of (Document Number, if known)	
	Florida.	
•	(Signature of resigning officer/director)	SECRETARY TALLAHASSE
		OF STATE E. FLORIE

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