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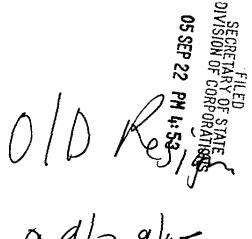
(Re	questor's Name)	
(Ad	dress)	
(Address)		
(Cit	ty/State/Zip/Phone	<i>#</i>)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: KING WINDOW & Glass INC (Name of Corporation)
DOCUMENT NUMBER: <u>P95000092624</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
FRANK K THOMAS (Name of Person)
KING WINDOW & Glass INC (Name of Firm/Company)
5.821 NW CONUS Ct (Address)
Port St. Lucie FL 34986 (City/State and Zip Code)
For further information concerning this matter, please call:
MARIA KING at (172) 344-5385/772 3706767 (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
409 E. Gaines Street
Tallahassee, FL 32399

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RESIGNATION

Gentlemen:

I Frank Thomas, hereby tender my resignation as Vice President of
King Window and Glass Inc.
A Florida Corporation, to take effect at the conclusion of the meeting of the Board of
Directors/Officers, at which this is accepted.

Dated: August 31, 2005

OS SEP 22 PM 4: 53

Frank Thomas