PD5000102207

(Requ	uestor's Name)
(Addi	ess)	
(Addr	ress)	•
(City/	State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Na	me)
(Document Number)		
Certified Copies	Certificate	s of Status
Special Instructions to Fil	ling Officer:	

Office Use Only

OD/RES 10, 7.12.04



100076582541

07/03/06--01015--002 **35.00

FILED

OF JUL -3 AM IO: OO

SECKLIARY OF STATE
ALLAHASSEF FLORINA

COVER LETTER

то:	Amendment Section Division of Corporations
SUBJ	ECT: Pur-Air of Florida, Inc. (Name of Corporation)
DOCI	UMENT NUMBER: P05000102207
	UNIENI NUMBER.
The er	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	return all correspondence concerning this matter to the following:
Porfi	rio Ramirez
	(Name of Person)
	(Name of Firm/Company)
7576	S SW 102 Street #407
	(Address)
Pine	crest, FL 33156
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
Porfir	io Ramirez at (305) 393-1055 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclos	sed is a check for \$35.00 made payable to the Florida Department of State.
Amend Division Clifton 2661 E	Address: dment Section on of Corporations on Building Executive Center Circle assee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

_I Porfirio Ramirez	, hereby resign as Secretary	
*	(Title)	
of_Pur-Air of Florida Inc	;	
(Name of Corpo	oration) .	
P05000102207 , a cor (Document Number, if known)	rporation organized under the laws of the State of	
Florida		
Signature (Signature	OF JUL -3 AH IO OO TESIGNING OFFICER FLORIDA	

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