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Withdrawal DC

### **COVER LETTER**

| Division of Corporations  |
|---|
| SUBJECT: CONSOLIDATED AIR CONDITIONING, INC. (Name of Corporation)        |
| DOCUMENT NUMBER: We do not know the document number                       |
| The enclosed withdrawal application and fee are submitted for filing.     |
| Please return all correspondence concerning this matter to the following: |
| LEO C. JONES, JR.   |
| (Name of Person)  |
| CONSOLIDATED AIR CONDITIONING, INC.                                       |
| (Firm/Company)  |
| P.O.BOX 9189  |
| (Address)   |
| MOBILE, ALABAMA 36691 (City/State and Zip code)                           |
| (Gity, State and Exp Gods)  |
| For further information concerning this matter, please call:              |
| LEO C. JONES, JR. at 251-602-1806   |
| (Name of Person) (Area Code & Daytime Telephone Number)                   |

#### **MAILING ADDRESS:**

TO:

Amendment Section

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

#### **STREET ADDRESS:**

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

| CONSOLIDATED AIR  |   |   |  |                   |             |  |
|---|---|---|--|-------------------|-------------|--|
|   | (Name of  | Corporation)                            |  |                   |             |  |
| WE DO NOT KNOW T  | HE DOCUMENT NUMBER (Document Number of  |   | 10000372                               | .2                |             |  |
|   | (Document Number of   | of Corporation (if kn                   | iown)                                  |                   |             |  |
| ALABAMA   | (Incorporated   | I Under Laws of)                        |  | <del></del>       | <del></del> |  |
| •   | ·   | ·                                       |  |                   |             |  |
| This corporation is no longer voluntarily surrenders its authorized This corporation revokes the appoints the Department of S | ority to transact business authority of its registered                        | s or conduct affa<br>I agent in Florida | airs in Florida.<br>a to accept servic | e on its be       | ehalf and   |  |
| the time it was authorized to   | _   | •                                       |  |                   | 0 0         |  |
| The following is a current ma   | iling address for the corp  | oration:                                |  |                   |             |  |
|   | mig dadrooc for the corp.   | 0141011.                                |  | ·                 |             |  |
| P. O. BOX 9189  |   |   |  | AE SE             | 3           |  |
| F. O. BOX \$169   | (Mailing  | g Address)                              |  | CRETARY<br>LAHASS | 7           |  |
| MOBILE, AL 36691-91   | ·   | · <b></b> -                             |  | <u> </u>          |             |  |
|   | (City/ S  | State /Zip)                             |  | F STATE           |             |  |
| The corporation agrees to no  | tify the Department of Sta  | ate in the future                       | of any change in                       | its-mailing       | address.    |  |
| X (Signature of a director, pr  | esident or other officer - if in the had on the fiduciary, by that fiduciary) | ¥                                       | 9/6/07                                 |                   |             |  |
| Leo C. Jones, Jr.   |   |   | Pres                                   | ident             |             |  |
|   | inted name of person signing)   | ······································  | (Title of person signing)              |                   |             |  |

FILING FEE \$35