

L05000028860

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD

SEP 9 - 2010

EXAMINER



600162770596

09/09/10--01003--001 **25.00

FILED
10 SEP -9 PM12:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Southern Air Conditioning & Heating L.L.C.

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Jerome Grissett

(Contact Person)

Southern Air Conditioning & Heating L.L.C.

(Firm/Company)

8250 Western Way Dr.

(Address)

Pensacola, Fl. 32526

(City/State and Zip Code)

For further information concerning this matter, please call:

Jerome Grissett

(Name of Contact Person)

at (850) 944-1739

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

\$25 Filing Fee

\$55 Filing Fee &
Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Southern Air Conditioning & Heating I.L.C.

2. This limited liability company was organized under the laws of:
State Of Florida

3. The Florida document/registration number of this limited liability company is:
L05000028860

4. I, Michael J Grissett, hereby resign as a Managing Member
(Print Name of Person Resigning) *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 SEP -9 PM 12:57

FILED