L09000092178

(F	Requestor's Name)
()	Address)
. (4	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



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T. HAMPTON

AUG - 3 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: fla ac service and duct	t cleaning		
	nited Liability Company)		
The enclosed member, managing member of filing.	or manager resignation and fee(s) are submitted for		
Please return all correspondence concerning	this matter to:		
yoseph cetton			
(Contact Person)	,		
fla ac service and duct cleaning			
(Firm/Company)			
1839 sw 31 ave			
(Address)			
pembroke park florida 33009	<u> </u>		
(City/State and Zip Code)			
For further information concerning this matt	ter, please call:		
joe	at 347 9337323		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable	to the Florida Department of State for:		
	Certified Copy		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section Division of Corporations	Registration Section		
Clifton Building	Division of Corporations P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314		

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as			ida Departmen	
of State is: FL	A AC SERVICES AND	DUCT CLEANING	LLC	<u> </u>	
•					
	pility company was organized	d under the laws of:			
florida		, - :			
•					
3. The Florida doc	ument/registration number o	f this limited liability of	company is:	•	
L09000092			• •		
		······································			
4. I, yoseph ce	etton	, hereby resign a	_{s a} preside	nt	
	lame of Person Resigning)	,yg,	(Print Title)		
of this limited lia	bility company and affirm the	e limited liability com	pany has been	notified of my	
resignation is wi	illing.				
			ì		
Signature of Res	igning Member, Managing N	dember or Manager	•	,	
	. تا ایک در	- 20	<u>.</u>	_	
			ı	ت	
Filing Fee:	\$25.00 (Required)		• .		
Certified Copy:	\$30.00 (Ontional)			<u> </u>	

CR2E079 (5/06)

SECRETARY OF STATE
DIVISION OF CORPORATIONS