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SECRETARY OF STATE

Officer Resignation

TB 16/7/18

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: HOLIDAY Air CONDITIONING & REFRIGERATION -Tre. (Name of Corporation)
DOCUMENT NUMBER: L 48214
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DEBORAH D. WATSON (Name of Person)
HOLIDAY Air Conditioning & REFRIGERATION, Fre. (Name of Firm/Company)
4734 TROUBLE CREEK ROAD (Address)
NEW PORT RICHEY FL. 34652 (City/State and Zip Code)
For further information concerning this matter, please call:
Deborary D. WATSON at (727) 207-8571 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

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

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

ASECULATION

AMULE

(Title)

(Title

Deboral Delatare (Signature of resigning officer/director)

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