P00000110407

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

. .

400055537024

06/02/05--01008--007 **35.00

FILED 05 JUN-2 PM 1:46

Office Use Only

of off

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

- 44

SUBJECT: Able Fire Sprinkler Inc.

5

*

SUBJECT: / die / we opinital indi		<u> </u>		
•	of Corporation	n)		
DOCUMENT NUMBER: P00000110407	<u> </u>	<u></u>		 · ·
The enclosed Officer/Director Resignation for a Corp	poration an	d fee are submitte	ed for filing.	
Please return all correspondence concerning this mat	tter to the fo	ollowing:		
David Wagner				
(Name of Person)		* •	-	2
Able Fire Sprinkler Inc.				
(Name of Firm/Company)	<u></u>	: - ·		
3365 Lake Worth Rd. #13				-
(Address)				
Lake Worth, Florida 33461	<u> </u>		*	
(City/State and Zip Code)				
For further information concerning this matter, pleas	se call:			
David Wagner at (954 ₎ 8	30 1938		
(Name of Person) (A	vrea Code &	Daytime Telephon	e Number)	

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

.

<u>Street Address:</u> Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

- 1

•

¢

ς.

I,John A Wagner	, hereby resign as Vice President (Title)			.*	
of Able Fire Sprinkler Inc.	Name of Corporation)		,	• •	
P00000110407 (Document Number, if known)	, a corporation organized under the laws of the State of	05-JUN	<u></u>	Ę	
Florida	<u> </u>	-2 PM 1:46	LED	·	
A	(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

-