P01000024050

(Re	equestor's Name)	
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	<i>→ #</i>)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
		į
		i

Office Use Only



400181031234

05/28/10--01027--011 **35.00

2010 MAY 20 AM 9: 07
SECRETARY OF STATE

off. Resign.

B MAY 2 1 20101

Micheal S. Cloer 31 Sycamore Circle Ormond Beach, Fl 32174

April 16, 2009

Central Air Restoration Company 1293 North US HWY 1 Suite 6 Ormond Beach, Fl 32174

This letter is to serve as my resignation from the company and as an officer of the company effective immediately. I believe there is to much of a conflict of interest and that the company's direction and mine are in line with one another.

Please remove my name from any and all correspondence and all corporate filings.

Thank you

Micheal S. Cloer

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Resignation/ Termi	nated 4/16/2009
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER: P01	000024050
The enclosed Officer/Director Resi	ignation for a Corporation and fee are submitted for filing
Please return all correspondence co	oncerning this matter to the following:
Micheal S. Cloer	
(Name of Per	son)
(Name of Firm/C	ompany)
31 Sycamore Circle	
(Address)	
Ormond Beach, FL 32174	
(City/State and Z	ip Code)
For further information concerning	this matter, please call:
Micheal Cloer	at (386) 566-7833 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made	de payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



Micheal S. Cloer	, hereby resign as President	
/ 	(Title)	
f Central Air Restoration Com	pany	
	ne of Corporation)	
P01000024050 (Document Number, if known)	, a corporation organized under the laws of the State of	
Florida		
	(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