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(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:]					





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SECRETARY OF STATE
TALLAHASSEE, FI STATE

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: A & C of Morthwest Florida INC (Name of Corporation)
DOCUMENT NUMBER: PO 10000 88 1 17
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Anthony VATES (Name of Person) OBA Fugly Worm Pub A &C of Northwest Fl. INC DBA Admiral Heat & Aire (Name of Firm/Company)
880 Hwy 29 South (Address)
Cantonment F1. 32533
(City/State and Zip Code)
For further information concerning this matter, please call:
Kichard Wallace at (850) 176 5203 (Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made 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

ı, Richa	rd Walla	<i>'{},</i> hereb	y resign as	Secret	ary	Dir
of AEC	of North	hwest	Florida	7 Inc.		_,
POIC	00088/17 Jumber, if known)				ate of	
-FLOR	rida_					
				FALLAH	2010 NOV 21	TI
				ASSEE.	724 PH	FFI
	(Si	ignature of resigning	g officer/director)	FLORI	in i	3

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