P02000105408

(Re	questor's Name)	
	,	
(Address)		
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
	- M	
(Lid	cument Number)	
Certified Coples	Certificates	s of Status
Special Instructions to	Filing Officer:	
		1



300041554193

10/08/04--01005--009 **35.00

04 OCT -6 PM 3

Office Use Only

OD | Res 10.13.24

TRANSMITTAL LETTER

, ,
TRANSMITTAL LETTER
TO: Amendment Section Division of Corporations
SUBJECT: 19/1 QUALITY Alum & Screen Inc 3 (Name of Corporation)
DOCUMENT NUMBER: 90000 8124709
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SAM Mickels (Name of Person)
All Quality Alumt Screen Finc (Name of Firm/Company)
8942 SW Bonneville
Stunt Fl. 34997 (City/State and Zip Code)
For further information concerning this matter, please call:
SAM MICKels (Name of Person) at (571) 5/2-6/63 (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
P.O. Box 6327
Tallahassee, FL 32314

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, CHarles F. LAW, J', hereby resign as President (Title)

of All Quality Aluminum Screen Inc.

(Name of Corporation)

90008/24709, a corporation organized under the laws of the State of

(Document Number, if known)

Floudia

(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