P0300032266

(Re	questor's Name)	
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(Ad	ldress)	
(Cit	ty/State/Zip/Phone	; #)
PICK-UP	WAIT	MAIL
· (Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	· Certificates	of Status
Special Instructions to Filing Officer:		
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SECRETARY OF STATE

off. Resign.

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AUG 18 2009

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: QUALITY AIR OF BAY COUNTY, INC
(Name of Corporation)
DOCUMENT NUMBER: P03000032266
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
CHRISTOPHER S. ROBY
(Name of Person)
QUALITY AIR OF BAY COUNTY, INC
(Name of Firm/Company)
PO BOX 15452
(Address)
PANAMA CITY, FL 32406
(City/State and Zip Code)
For further information concerning this matter, please call:
CHRISTOPHER S. ROBY (Name of Person) at (850) 763-4729 (Area Code & Daytime Telephone Number)
(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



JANICE N. ROBY	, hereby resign as TREASURER	
	(Title)	
of QUALITY AIR OF BAY COUN	ΓY, INC	
	of Corporation)	
P03000032266 (Document Number, if known)	, a corporation organized under the laws of the State of	
(150cument Number, 11 known)		
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
Taltahassee, Florida 32314