

P0300012454/8

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

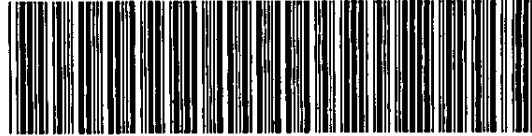
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Absolute A/ C & APPLIANCE REPAIR INC.

(Name of Corporation)

**DOCUMENT NUMBER:** P01366580 P03 000124548

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Daniel S. Osborne**

(Name of Person)

**Absolute A/C & Appliance Repair Inc.**

(Name of Firm/Company)

**2511 Statler Ave.**

(Address)

**Springhill, Fl. 34609**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Daniel S. Osborne**

(Name of Person)

at **352 688-8882**

(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  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Daniel S. Osborne, hereby resign as President  
(Title)

of Absolute A/C & Appliance Repair Inc.  
(Name of Corporation)

P01366580 P03000124548  
(Document Number, if known), a corporation organized under the laws of the State of

Florida

**Daniel S Osborne**  
Digitally signed by Daniel S Osborne  
DN: cn=Daniel S Osborne, o=Daniel S. Osborne, ou,  
email=dosbeolts@yahoo.com, c=US  
Date: 2016.03.10 14:23:49 -0500  
(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

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