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(Re	questor's Name)	•
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
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(Bu	siness Entity Nam	e)
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Officer Rusignation

17-23-08

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Air Murphy A/C AND	REFRIGERATION CORP
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER: P030	00142357
The enclosed Officer/Director Resig	nation for a Corporation and fee are submitted for filing
Please return all correspondence cor	cerning this matter to the following:
IRENE MURPHY	
(Name of Person	on)
Air Murphy A/C AND REFRIGE	RATION CORP
(Name of Firm/Con	mpany)
2901 SW 137TH TERRACE	
(Address)	
DAVIE FL 33330	
(City/State and Zip	Code)
For further information concerning t	his matter, please call:
IRENE MURPHY	at (954) 818-2760
(Name of Person)	at (954) 818-2760 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made	e 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

TASECRETARY OF STATE OF STATE

I, PAUL MURPHY	, hereby resign as TREASURER
-7	(Title)
of_ Air Murphy A/C AND REFRIC	GERATION CORP.
(Nam	e of Corporation)
P03000142357	, a corporation organized under the laws of the State of
(Document Number, if known)	
FLORIDA	
1 4	
Turk	Mungally -
	(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