

PO4000159208

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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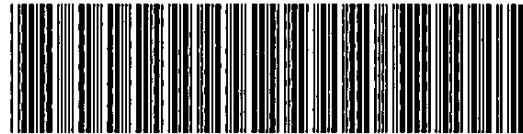
(Business Entity Name)

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TALLAHASSEE, FLORIDA

Handwritten signature/initials

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Brian Dixon, hereby resign as ASSISTANT TREASURER
(Title)

of Southern Automotive Mobile AC & HEATING SERVICE, INC.
(Name of Corporation)

PS4000159208 a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Brian Dixon
(Signature of resigning officer/director)

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TALLAHASSEE, FLORIDA

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