## P05000121302

| (Requestor's Name)                      |  |  |  |  |  |
|---|--|--|--|--|--|
| (Address)                               |  |  |  |  |  |
| (Address)                               |  |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |  |
| (Document Number)                       |  |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |  |
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## **COVER LETTER**

| TO:                                    | Amendment Section Division of Corporations  |
|--|---|
| SURI                                   | A Perfect Ten Indoor Air Quality and Water Proofing, Inc.   |
| <b>БОВ</b>                             | (Name of Corporation)   |
| DOC                                    | UMENT NUMBER: P05000121302  |
| The er                                 | nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing   |
| Please                                 | e return all correspondence concerning this matter to the following:  |
|  | Tracy Singleton   |
|  | (Name of Person)  |
| 1st C                                  | Choice Management and Consulting, Inc.  |
|  | (Name of Firm/Company)  |
|  | 7390 NW 52nd Street   |
|  | (Address)   |
|  | Lauderhill, Florida 33319   |
|  | (City/State and Zip Code)   |
| For fu                                 | rther information concerning this matter, please call:  |
|  | Tracy Singleton at ( 954 ) 600-7644  (Name of Person) (Area Code & Daytime Telephone Number)  |
|  | (Name of Person) (Area Code & Daytime Telephone Number)   |
| Enclos                                 | sed is a check for \$35.00 made payable to the Florida Department of State.   |
| Amend<br>Division<br>Clifton<br>2661 E | Address:  Idment Section  In of Corporations  Building  Executive Center Circle  Amendment Section  Division of Corporations  Post Office Box 6327  Tallahassee, FL 32301 |

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| τ. | Cornelius S. Osborne                     | , hereby resign as  | President  |  |
|----|--|---|--|--|
| -, |  |   | (Title)  |  |
| of |  | ir Quality and Water Proofing,                            | , Inc.   |  |
| _  | (Name of Corporation)                    |   |  |  |
|    | P05000121302 (Document Number, if known) | _, a corporation organized under the laws of the State of |  |  |
|    | Florida                                  |   |  |  |
|    | Coinc !                                  | gnature of resigning officer/director)                    | FILED  05 NOV -9 PM 1: 1:  SEURETARY OF STATI ALI AHASSEE, FLORI |  |

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