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| (Requestor's Name) | | | | | | | | |
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| Special Instructions to | Filing Officer: | | | | | | | |
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Office Use Only



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COVER LETTER

| Division of Corporations |
|----------------------------------------------------------------------------------------------|
| SUBJECT: Aluminum Building Installers, Inc. (Name of Corporation) |
| DOCUMENT NUMBER: PO600015249 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing |
| Please return all correspondence concerning this matter to the following: |
| Carlos Reyes (Name of Person) |
| (Name of Firm/Company) |
| 1801 Lyans Rd Apt 107 (Address) |
| Coconut Creek, FL 33063 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Corlos Reyes at (984) 479-828 6 (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

Amendment Section

TO:

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I,(| Carlos | Reyes | | _, hereby resign as | Direc | (Title) | |
|-----------|---------|----------------------|---------------|------------------------|----------------|--------------|------------------|
| of_A | luminum | Buildi (Na | ns Ins | stallers In | ic. | | , |
| POL | OOOO (| 5249 r, if known) | , a corpo | ration organized u | inder the laws | of the State | of |
| <u></u> F | lonida | | • | | | < | 180 1814/10 |
| | | Par | , U | | | | SEGRETARY OF STA |
| | _(| | (Signature of | resigning officer/dire | ector) | | 1. to |

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