## P06000077694

| questor's Name)   |   |
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| dress)            |   |
| //State/Zip/Phone | e #)  |
| ☐ WAIT            | MAIL  |
| siness Entity Nan | ne)   |
| cument Number)    |   |
| Certificates      | of Status   |
| Filing Officer:   |   |
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Office Use Only



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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

Officer Risign CrivMeriphy 1/16/08

## **COVER LETTER**

|   | ndment Section<br>sion of Corporations   |
|---|--|
| SUBJECT:  | D.J. Air and Heat, Inc.  |
| ·   | (Name of Corporation)  |
| DOCUMEN   | NT NUMBER: P06000077694  |
| The enclosed  | d Officer/Director Resignation for a Corporation and fee are submitted for filing  |
| Please return   | all correspondence concerning this matter to the following:  |
| Irene Fonz  | ;i   |
|   | (Name of Person)   |
| Attorney a  | t Law  |
|   | (Name of Firm/Company)   |
| 1402 High   | way A1A, Suite A   |
|   | (Address)  |
| Satellite Be  | each, FL 32937   |
|   | (City/State and Zip Code)  |
| For further in  | formation concerning this matter, please call:   |
| Dennis Lab  | be at ( 321 ) 514-1717   |
|   | be at (321) 514-1717  (Name of Person) (Area Code & Daytime Telephone Number)  |
| Enclosed is a   | check for \$35.00 made payable to the Florida Department of State.   |
| Street Addre<br>Amendment S<br>Division of C<br>Clifton Buildi<br>2661 Executiv<br>Tallahassee, F | Section Amendment Section orporations Division of Corporations ing Post Office Box 6327 ve Center Circle Tallahassee, FL 32314 |

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I, Michael Myers             | , hereby resign as_                                       | Vice President/  | Secretary                                 |
|------------------------------|---|------------------|---|
|                              |   | (Ti              | itle)                                     |
| of D.J.'s Air and Heat, Inc. |   |                  | ,   |
| (Name                        | of Corporation)   |                  |   |
| P06000077694                 | _, a corporation organized under the laws of the State of |                  |   |
| (Document Number, if known)  |   |                  |   |
| Florida.                     |   |                  |   |
|                              | <b>_'</b>   |                  |   |
|                              |   |                  |   |
|                              |   |                  |   |
|                              |   |                  |   |
| Mire                         | 10, m   | מרר. ני          | 12/21/07                                  |
| /'wc                         | ignature of resigning officer/direct                      | or)              | ve 12/31/07                               |
|                              | •   |                  |   |
|                              |   |                  |   |
|                              |   |                  |   |
|                              |   |                  | <u>A</u> _S <sub>E</sub> <b></b>          |
|                              |   |                  |   |
| r                            | ILING FEE IS \$35.00                                      |                  | F I L<br>08 JAN I I<br>SECKETAR'          |
|                              |   |                  | SER -                                     |
|                              | - FI  | tate and mail to | a 3 m                                     |
| Make checks payable t        | to Fiorida Department of St                               | tate and man to. |   |
| Make checks payable t        | to Fiorida Department of St                               | are and man to.  | F STA                                     |
| Make checks payable t        | Amendment Section   | are and man to.  | PH 4: 04 OF STATE                         |
| Make checks payable t        | ·   | ate and man to.  | III PH 4: 04 TARY OF STATE ASSEE, FLORIDA |