(Requestor's Name)	
(Address)	40015833698
(City/State/Zip/Phone #)	Mesignat
PICK-UP WAIT MAIL	90 0912
(Business Entity Name)	08/03/0901007005 *
(Document Number)	
Certified Copies Certificates of Status	SECRET TALL AH
Special Instructions to Filing Officer:	ASSEE-FLORIDA
,	

Office Use Only



34

**35.00

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: South Florida Wind	ows Inc.
	(Name of Corporation)
DOCUMENT NUMBER: P07	000034440
The enclosed Officer/Director Resi	ignation for a Corporation and fee are submitted for filing
Please return all correspondence co	oncerning this matter to the following:
Michael Karnbach	
(Name of Per	son)
South Florida Windows Inc.	
(Name of Firm/C	ompany)
202 2nd court	
(Address)	
Palm Beach Gardens Florida 3	33410
(City/State and Z	ip Code)
For further information concerning	this matter, please call:
Michael Karnbach	at (561) 307-0472
(Name of Person)	at (561) 307-0472 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 mag	de 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

FILED

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION 2009 AUG -3 PM 12: 53

SECRETARY OF STATE TALLAHASSEE.FLORIDA

, Albert Karnbach	, hereby resign as secretary
9	(Title)
of South Florida Windows Inc.	
(Name of	Corporation)
P0700034440 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	
	cerses 4-12-09 gnature 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