

PO7000070636

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

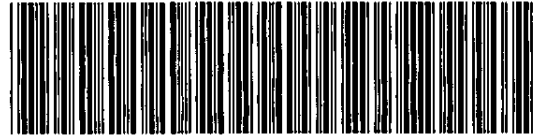
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
14 DEC 12 AM 11:53

C.L.  
12-17-14

# TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Best Choice Air Conditioning & Heating Inc  
(Name of Corporation)

DOCUMENT NUMBER: P07000070636

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Maryanne Lattimore  
(Name of Person)

Best Choice Air Conditioning & Heating Inc  
(Name of Firm/Company)

332 SW Enon St.  
(Address)

Port St. Lucie, FL 34953  
(City/State and Zip Code)

For further information concerning this matter, please call:

Maryanne Lattimore at 772 359-1147  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:  
Amendment Section  
Division of Corporations  
P.O. Box 6527  
Tallahassee, FL 32314

Street Address:  
Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

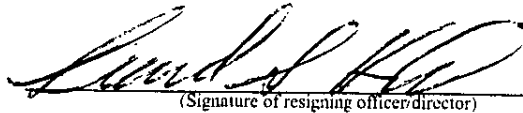
14 DEC 12 AM 11:53

I, LEONARD HILL, hereby resign as TREASURER  
(Title)

of BEST CHOICE AIR CONDITIONING & HEATING INC  
(Name of Corporation)

P07000070636, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature 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