P9200005467

(Re	equestor's Name)	
(Ar	ldress)	
(* 1.0	iui essy	
(Ac	ldress)), (***
(Cil	ty/State/Zip/Phone	#)
(5	3,000 mpr 110110	•••
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Elling Officer	
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TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: ACTION AIR CONDITIONING OF SARASOTA, INC. (Name of Corporation)
DOC	UMENT NUMBER: P92000005467
The en	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	e return all correspondence concerning this matter to the following:
Mr.	Ken Pilat (Name of Person)
_Act:	ion Air Conditioning of Sarasota, Inc. (Name of Firm/Company)
1350	6 Georgetowne Cr. (Address)
Sara	asota, FL 34232 (City/State and Zip Code)
For fu	orther information concerning this matter, please call:
Ken	Pilat at (941) 371-6677 (Name of Person) (Area Code & Daytime Telephone Number)
Enclo	sed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divisi P.O. I	Ing Address: Indiment Section Indiment Section Indicate of Corporations

FILED

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

03 APR 17 PM 4: 24

ALLAHASSEE FLORIDA

I, BOB LARNER	, hereby resign as Vice Pre	sident of Maintenance
		(Title)
of ACTION AIR CONDITIONING OF S	SARASOTA, INC.	,
	a corporation organized under the law	s of the State of
Florida .		
Sign (Sign	L Luciature of resigning officer/director)	
Bob Larner		

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