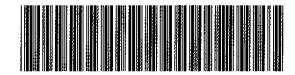
P93000028013

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



200119011292

Alserration of O3/03/08--01022--010 **35.00

·



3/4/08

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: MASTER ORAFT PLUBING INC (Name of Corporation)		
DOCUMENT NUMBER: <u>7936000 28013</u>		
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
MICHAEL G. FINK (Name of Person)		
(Name of Firm/Company)		
1110 PINE ISLAND RD #11 (Address)		
(Address)		
Care Coral Fl 33909 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
NANCY WENZ 4 CK at (239) 337-1363 (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:Mailing Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsClifton BuildingPost Office Box 63272661 Executive Center CircleTallahassee, FL 32314		

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED

2008 MAR -3 AM II: 57

SECRETARY OF STATE TALLAHASSEE.FLORIDA

, MICHAEL G. FINK	, hereby resign as DIRECTOR
	(Title)
of MASTEE CRAFT	PLWABING, INC
(Name of	f Corporation)
(Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	•
(Sig	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