P96000016936

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

Office Use Only



900108841479

09/04/07--01020--024 **35.00

FILED

07 SEP -4 AMII: 01

SCORE TARY OF STATE
ORIGHNASSEE, FI ORIGH

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: HURRICANE Plumbing & Sprinkler Services, Income of Corporation)
DOCUMENT NUMBER: P96000016936
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person)
Horricane Plumbing (Name of Firm/Company)
PC BCX LCC (Address)
STUATIFL. 34996 (City/State and Zip Code)
For further information concerning this matter, please call:
CHIZIS SEQUEIRA at (772) 341-7473 (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made 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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, CHRIS SEQUEIRA, hereby resign as Vice President (Title)
of Huericane Plumbing & Sprinker Saviger, Inc. (Name of Corporation)
P9600016936, a corporation organized under the laws of the State of (Document Number, if known)

ignature of resigning officer/director)

ORIDA

FILED

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