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Michael D Leigh Po Box 555996 Orlando, FL 32855-5996 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Walk in Pick up time Photocopy Certificate of Status Mail out Will wait AMENDMENTS... NEW FILINGS Amendment Profit Resignation of R.A., Officer/ Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILINGS **OUALIFICATION** Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials

OFFICER / DIRECTOR RESIGNATION

I, MICHAEL D. LEIGH	, hereby resign as DIRECTOR
	(Title) $\Xi \simeq 9$
of MIDWAY I CON AND MET	AL, INC. # P972000 \$ 980
(Name of Corporation	SSEE SSEE
a corporation organized under the laws of the State	of FLORIDA FS S
	TATE ORRIDA
and affirm that the corporation has been notified in writing of the resignation.	

(Signature of resigning officer/director)

FILING FEE IS \$35.00