115000138936

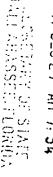
(Re	questor's Name)	
(Ad-	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

SUBJECT: B-Z Aero, LLC (Name of Limited Liability Com	
(Name of Limited Liability Com	
	are submitted for filing.
The enclosed member, resignation or dissociation and fee(s)	
Please return all correspondence concerning this matter to:	
David A. Zeller, Registered Agent	
(Contact Person)	
B-Z Aero, LLC	
(Firm/Company)	
4905 Southwind Drive	
(Address)	
Mulberry, FL 33860	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
David A. Zeller 863	646-3779
(Name of Contact Person) (Area Code	& Daytime Telephone Number)
Enclosed please find a check made payable to the Florida De \$25 Filing Fee \$55 Filing	epartment of State for: Fee & Certified Copy
Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

of State is: B-Z Aero, LLC	<u>:</u> ,·	_
2. The Florida document/registration number assigned to this limited liability company L15000138936	is:	/ BEC 27
3. The date this member/manager withdrew/resigned or will withdraw/resign is: STEPHEN R. BENSINGER (Print Name of Person Resigning) June Hereby withdraw/resign as a	0, 2	A7 1: 51
Authorized Member (Print Title)		
of this limited liability company and affirm the limited liability company has been not resignation in writing.	ified	of my
Signature of Dissociating Member or Resigning Manager		
Signature of Dissociating Member of Resigning Manager		
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)		