



## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Wings Over Miami Museum, Inc.

(Name of Corporation)

**DOCUMENT NUMBER:** N01000008700

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Suzette Rice**

(Name of Person)

(Name of Firm/Company)

**1421 SE 16 Ave**

(Address)

**Homestead, FL 33035**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Suzette Rice**

(Name of Person)

at ( **305** ) **323-9995**

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Suzette Rice, hereby resign as Director  
(Title)

of Wings Over Miami Museum, Inc.  
(Name of Corporation)

N01000008700, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

*Suzette Rice*  
(Signature of resigning officer/director)

2018 OCT -4 PM 3:28  
SECRETARY OF STATE  
TALLAHASSEE, FL

**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

*Check # 1198*