

PI5000014839

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

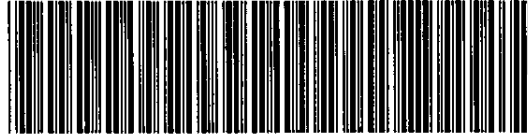
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

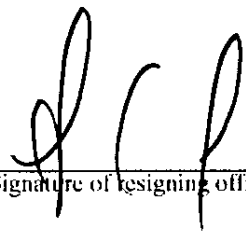
I, LUIS AJAMIL, hereby resign as DIRECTOR
(Title)

of AVIATION BUSINESS CORPORATION
(Name of Corporation)

P15000014839, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

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(Signature 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