F21363

(Re	questor's Name)	•
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Eiling Officer	
Special instructions to	riming Officer.	
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My Sir Resign

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: TROY AIR CONTROL /NC.

(Name of Corporation)

DOCUMENT NUMBER: 2

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

Please return all correspondence concerning this matter to the following:

FREDERICK L. STROUSE (Name of Person)

TROU AIR CONTROL /NC (Name of Firm/Company)

Po. Box. 1747 (Address)

FORT Pierce, Fl. 34954 (City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person)

(Name of Person)

(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 OFFICER / DIRECTOR RESIGNATION

I,	Jason E. STROUSE, hereby resign as UICE PRES.
	(Title)
of_	TROY AIR CONTROL INC. (Name of Corporation)
	(Document Number, if known), a corporation organized under the laws of the State of
	Florida.
	Jason Atrouse
	// (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