

K73251

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400267707804

01/05/15--01012--007 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 JAN -5 AM 11:24

CL.
1-9-15

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NOSTALGAIR - SKY ADVENTURES, INC.

(Name of Corporation)

DOCUMENT NUMBER: K73251

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

Please return all correspondence concerning this matter to the following:

Susan Leighton

(Name of Person)

NOSTALGAIR - SKY ADVENTURES, INC.

(Name of Firm/Company)

po 740020

(Address)

Boynton Beach FL 33474

(City/State and Zip Code)

For further information concerning this matter, please call:

Susan Leighton

(Name of Person)

at (561) 752 3261

(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**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

15 JAN -5 AM 11:24

I, Susan Leighton, hereby resign as Secretary, Treasurer
(Title)

of Nostalgaire Sky Adventures Inc
(Name of Corporation)

k73251, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.


(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