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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Avion Jet Charter, L.L.C. (Name of Limited Liability Company)
DOCUMENT NUMBER: L01000019129
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Marty A. Stone, Esq.
(Name of Person)
Greenspoon Marder, P.A.
(Name of Firm/Company)
201 E. Pine Street, Suite 500
(Address)
Orlando, FL 32801
(City/State and Zip Code)
For further information concerning this matter, please call:
Marty A. Stone at (407) 425-6559 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

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

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	sions of section 608.416(2)) or 608.509, Florida Sta	atutes, the undersign	ed,		
N. Dwayne Gray, Jr., Esq.			, hereby resigns as			
	(Name of Registered Agent))	_,	•		
Registered Agent for	Avion Jet Charter, L	L.C.				_
	(Name of Limite	ed Liability Company)				_,
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(Document Ni	ımber, if known)	-				
	tion was mailed to the abo					
If signing on behalf of	·	re of Resigning Age (t)		SEC	06 t	THE BR
	(Тур	ed or Printed Name)		AHASSI	06 MAY 10	
		(Capacity)		STATE	AH IO: 17	

FILING FEES:

\$ 85.00 Active limited liability company

\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314