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DIVISION OF CORPORATIONS

OR AUG -8 PM 1: 25

J. BRYAN

AUG 1 1 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: C & H AERONAUTICS, LLC (Name of Limited Liabil)	íty Company)
The enclosed member, managing member or manage filing.	r resignation and fee(s) are submitted for
Please return all correspondence concerning this matt	eer to:
JAMES W. PRITCHARD III, ESQ.	
(Contact Person)	
RICHARD C. WILLIAMS, JR., P.A.	08 AUG -8
(Firm/Company)	
6337 GRAND BOULEVARD	08 NUG -8 PM 1: 25
(Address)	
NEW PORT RICHEY, FL 34652	25
(City/State and Zip Code)	<del></del>
For further information concerning this matter, please	e call:
JAMES W. PRITCHARD III, ESQ. at ( 7)	27 846-8500 Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Flo \$25 Filing Fee	orida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company a		of the Florida Dep	artment
2. This limited liabi FLORIDA	lity company was organize	d under the laws of:		8 - 5014 80
3. The Florida docu L06000091	ment/registration number o	of this limited liability com	pany is:	PH 1:25
4. I, STEVE W.	HENRY une of Person Resigning)	, hereby resign as a _	MGRM (Print Title)	
of this limited liab resignation in writ	ility company and affirm the	-	,	d of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			