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	To: Division of Corporations Fax Number : (850)617-6383				
	From: Account Name : MARK B. GOLDSTEIN, P.A. Account Number : 120050000077 Phone : (561)989-9955 Fax Number : (561)989-9966 Phone : (561)989-9966				
	Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Email Address:				
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: JET SALES INTERNATIONAL, LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Mark B. Goldstein

(Contact Person)

Mark B. Goldstein P.A.

(Firm/Company)

2700 N. Military Trail, Ste. 130

(Address)

Boca Raton, FL 33431

(City/State and Zip Code)

For further information concerning this matter, please call:

Mark B, Goldstein	.561	989-9955
	_ at (_)
(Name of Contact Person)	(Arca Code	& Daytime Telephone Number)

-a 5

Enclosed please find a check made payable to the Florida Department of State for: \$\Box\$ \$\\$25 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

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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY (Pursuant to 605.0216, Florida Statutes)

- 2. The Florida document/registration number assigned to this limited liability company is: L13000085179

3. The date this member/manager withdrew/resigned or will withdrew/resign is: _____

4. I, Mark B. Goldstein

, hereby withdraw/resign as a

(Print N	lame of Person Resigning)
Manager	
7	(Print Title) Offity company and attirm the limited liability company has been notified of my iting
Signature of Di	spociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)

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