# L13000119229

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B. BOSTICK
APR 1 4 2014
EXAMINER

#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: FLYOTECH, LLC	
(Name of Limited Liability Company)	
The enclosed member, resignation or dissociation and fee(s) are submitted for filing	3.
Please return all correspondence concerning this matter to:	
HOLDEN HARRIS	
(Contact Person)	
FORMER MANAGING MEMBER OF FLYOTECH	
(Firm/Company)	
640 SEABROOK COVE RD.	
(Address)	
JACKSONVILLE, FL 32211	
(City/State and Zip Code)	
For further information concerning this matter, please call:	28
HOLDEN HARRIS 904 476-0984	) ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
(Name of Contact Person) (Area Code & Daytime Telephone No	ımber).
Enclosed please find a check made payable to the Florida Department of State for:  \$\Bigsim \\$25 \text{ Filing Fee & Certified Copy}\$	

#### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

CR2E079 (2/14)

#### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



### 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)

	limited liability company as it	t appears on the records of the F	Florida Department
2. The Florida docu L1300011922	_	igned to this limited liability con	mpany is:
HOLDEN H	ARRIS  ame of Person Resigning)	ned or will withdraw/resign is:, hereby withdraw/resign as	
of this limited lial resignation in write	iting.	limited liability company has be	een notified of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		