

L13000164277

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

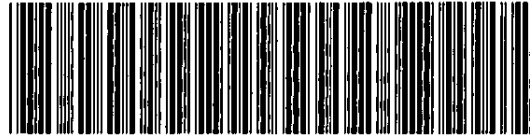
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

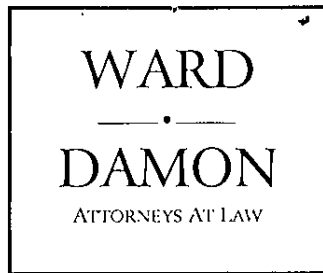


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FILED
15 OCT 15 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 15 2015
J SHIVERS



4420 BEACON CIRCLE
WEST PALM BEACH, FL 33407

Tel: (561) 842-3000

Direct Dial: (561) 594-1452

Fax: (561) 842-3626

www.warddamon.com



*Michael J Posner, Esquire
Michael J Posner, P.L.
Board Certified Real Estate Attorney
mjposner@warddamon.com*

October 7, 2015

Via Federal Express

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

Re: Jet Medivac LLC
Document Number: L13000164273

Dear Sir/Madam:

Enclosed please find Resignation of Manager and Articles of Amendment and Document Filing Sheets for the above referenced company together with the filing fee of \$25.00 per document. Please forward proof of filing same in the self addressed stamped envelope also provided herein for your convenience.

Please feel free to call our office should you have any questions regarding the above. Thank you for your assistance in this matter.

Very truly yours,

A handwritten signature in black ink, appearing to read "Michael J Posner", with a long, sweeping horizontal stroke extending to the right.

Michael J Posner
MJP/cz
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jet Medivac 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:

Michael J Posner

(Contact Person)

Ward Damon

(Firm/Company)

4420 BEACON CIRCLE

(Address)

WEST PALM BEACH, FL 33407

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael J Posner

at (561) 594-1452

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$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

Filing No.:



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Jet Medivac, LLC.

2. This limited liability company was organized under the laws of: Florida.

3. The Florida document/registration number of this limited liability company is: L13000164273.

4. I, Khamraj (Kem) Lall, hereby resign as a Manager of the limited liability Company and affirm the limited liability company has been notified of my resignation in writing.

Date: September 20, 2015

Khamraj (Kem) Lall by Balram Christopher Lall,
his attorney in fact Signature of Resigning Member,
Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)
CR2E079

Prepared by: Michael J Posner, Esq.
4420 Beacon Circle, Suite 100
West Palm Beach, Florida 33407
Bar No: 525685 • Phone: 561/842-3000

Filing No.:

FILED
15 SEP 25 AM 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA