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FLORIDA DEPARTMENT OF STATE || Division of Corporations

August 31, 2017

PETER D ANDREWS PO BOX 25 SAINT PETERSBURG, FL 33731

SUBJECT: AAA ARROW AIR LLC Ref. Number: L14000004246

We have received your document for AAA ARROW AIR LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 517A00018068

ZOLI SEP 18 PM 1: 30 ZOLI SEP 18 PM 1: 30 VALLAHASSEL FLORINA	
	www.sunbiz.org

TO: Registration Section Division of Corporations SUBJECT: $AAA Arrow Arrow Arrow Company)$ The enclosed Articles of Dissolution and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Pc - c D Arrow constraints (Name of Person) Attacr new (Firm/Company)	
TO: Registration Section Division of Corporations SUBJECT: $AAA Arrow Air LLC$ (Name of Limited Liability Company) The enclosed Articles of Dissolution and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: $Pc - c \cdot D Ardrews$ (Name of Person) A - Her ney	
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(Name of Limited Liability Company) The enclosed Articles of Dissolution and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: $\frac{Pc - r_{e} D_{e} Andrews}{(Name of Person)}$ $A - (A - C - C - C) + (N - C)$	
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Please return all correspondence concerning this matter to the following: $\frac{Pc - r \cdot D}{Name of Person}$ (Name of Person)	
Peter D. Andrews (Name of Person) A-tter ney	
Atterney	
Atterney	
(Firm/Company)	
735 Arlin, Ion Are N. 1 303	
St. Petersburg fl 33701	
(City/Style and Zip Code)	
For further information concerning this matter, please call:	
(Name of Person) at (72) <u>S21-5247</u> (Name of Person) at (72) <u>S21-5247</u>	, ,
Enclosed is a check for the following amount:	
S25.00 Filing Fee and Certificate of Dissolution S55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)	
MAILING ADDRESS:STREET/COURIER ADDRESS:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301	

	FICLES OF DISSOLUTION	
A LIM	ITED LIABILITY COMPANY	
1. The name of a limited liability comp		
2. The Articles of Organization were fi		
document number <u>LIHCC</u>	00424e	
 The delayed effective date the dissol (effective date cannon) <u>Note:</u> If the date inserted in this block of listed as the document's effective date of 	ution if not effective on the date of filing: $6/2c/17$ (be prior to or more than 90 days later than date document is received for tiling) does not meet the applicable statutory filing requirements, this date will not be in the Department of State's records.	2
605.0707. Florida Statutes. (copy 605	Ited in the limited liability company's dissolution pursuant to section 0707 on back cover letter).	
1		
	·•	
	The and address of the person appointed to wind up the company's \mathbb{P} eter D . And r eves \mathbb{P}	
7	35 Arturiton Arc N. # 303	
·		
	St. Petersberg fr 33701	
	ý	
6. Signature of an authorized person or	ji if there are no members, the signature of the person appointed and	
listed above to wind up the company's a	Peter D. Andrews	
Signature	Printed Name	
	FILING FEE: \$25.00	