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Registration Section TO: Division of Corporations Premier Aviation Holdings, LLC SUBJECT: (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: Daniel Madero (Contact Person) Madero Holdings, LLC (Firm/Company) 3041 NW 60th St. (Address) Fort Lauderdale/FL 33309 (City/State and Zip Code) For further information concerning this matter, please call: Daniel Madero (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

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



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)

1. The name of the	limited liability company as	it appears on the records of the F	lorida Department
of State is:	er Aviation Holdings, LLC		<u> </u>
2. The Florida docu L15000101014	ument/registration number as	ssigned to this limited liability con	
Daniel Alonso M	adera	igned or will withdraw/resign is:, hereby withdraw/resign as a	<u> </u>
(Print Name of Person Resigning) Manager/Managing Director			70
	(Print Title)		2: 22
of this limited lial resignation in wr		e limited liability company has be	en notified of my
	1/40		
Signature of Di	ssociating Member or Resign	ning Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		

Certified Copy:

\$30.00 (Optional)