116000218993

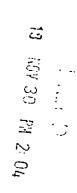
(R	lequestor's Name)		
(A	ddress)		
(A	ddress)		
(C	City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL	
(E	Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of	Status	
Special Instructions to Filing Officer:			





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11/80/18--01022--008 ++25.08



COVER LETTER

_	stration Section sion of Corporations		
SUBJECT:	Graham Aviation, LLC		
		Limited Liability Co.	mpany)
The enclose	d member, resignation or diss	ociation and fee(s) are submitted for filing.
Please returi	n all correspondence concerni	ng this matter to:	
Dan Graha	ım	,	
	(Contact Person)		_
	(Firm/Company)		-
1015 Lake	Shore Drive		
	(Address)		_
The Village	es, FL 32162		
	(City/State and Zip Code)		_
For further i	nformation concerning this m	natter, please call:	
Dan Graha	m	478	410-0114
(1)	lame of Contact Person)		& Daytime Telephone Number)
Enclosed pla E \$25 Filing	ease find a check made payab g Fee		Department of State for: g Fee & Certified Copy
	OURIER ADDRESS:		MAILING ADDRESS:
Registration Division of 0	Section Corporations		Registration Section Division of Corporations
Clifton Buile	•		P.O. Box 6327
	tive Center Circle Florida 32301		Tallahassee, Florida 32314

CR2E079 (2/14)



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)

The name of the limited liability company as it appears on the records of the Fit of State is: Graham Aviation LLC	lorida Departinent
2. The Florida document/registration number assigned to this limited liability con L16000218993	mpany is:
3. The date this member/manager withdrew/resigned or will withdraw/resign is:	11/13/2018
4. I, Jim Graham 4. I, hereby withdraw/resign as a (Print Name of Person Resigning)	
Managing Member	
(Print Tisle)	
of this limited liability company and affirm the limited liability company has be resignation in writing.	een notified of my
Signature of Dissociating Member or Resigning Manager	
Signature of Dissociating Member or Resigning Manager	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	