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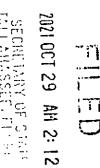
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COVER LETTER

TO:	~	stration Section sion of Corporations		•
		·		
SUBJ	ECT:	North Palm Beach Flight, LLC		
		(Name of	Limited Liability Co	ompany)
The er	nclosed	l member, resignation or diss	sociation and fee	(s) are submitted for filing.
Please	return	all correspondence concerni	ing this matter to):
David 1	Wojtano	owski		
		(Contact Person)	•	_
		(Firm/Company)		
12467 /	Aviles (Circle		
		(Address)		_
Palm B	each Ga	ardens, FL 33418		
		(City/State and Zip Code)		_
For fur	rther in	nformation concerning this m	atter, please call	:
David V	Wojtano 	wski	561 at (301-4414
	(Na	ame of Contact Person)	(Area Cod	e & Daytime Telephone Number)
Enclos	ed plea	ase find a check made payab	le to the Florida	Department of State for:
= \$25				ng Fee & Certified Copy
	Mailin	g Address:		Street Address:
		tration Section		Registration Section
		ion of Corporations		Division of Corporations
		Box 6327		The Centre of Tallahassee
	Tallal	nassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



FILED

2021 OCT 29 AM 2: 12

SECRETARY OF STATE

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)

	e limited liability company as it appears on the records of the Florida Departmen h Palm Beach Flight, LLC
	cument/registration number assigned to this limited liability company is:
3. The date this m	ember/manager withdrew/resigned or will withdraw/resign is:
4. I, Buz Russell	, hereby withdraw/resign as a warme of Person Resigning)
MGR	
	(Print Title)
of this limited lia resignation in w	ibility company and affirm the limited liability company has been notified of my riting.
Simon) Kill
Signature of D	issociating Member or Resigning Manager
	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)