L19000181943

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Document Number)		
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COVER LETTER

_	stration Section sion of Corporations		
SUBJECT:	FLY SMARTER LEASING LI	.c	
		f Limited Liability C	ompany)
The enclosed	d member, resignation or di	ssociation and fee	(s) are submitted for filing.
Please return	n all correspondence concer	ning this matter to) :
CARLOS E. E	BURGOS G.		
	(Contact Person)		_
BURGOS LA	W GROUP LLC		
	(Firm/Company)		_
48 WALL STI	REET, SUITE 1100		
-	(Address)		_
NEW YORK.	NY 10005		
	(City/State and Zip Code)		_
For further i	nformation concerning this	matter, please call	l:
CARLOS BUI	RGOS	212 at (9184459
(1)	lame of Contact Person)		le & Daytime Telephone Number)
Enclosed ple \$25 Filin	ease find a check made paya		Department of State for: ng Fee & Certified Copy
_ J2J IIIII	5 100	ווווו נכפי ניי	ig ree & certified copy
	ng Address:		Street Address:
-	stration Section sion of Corporations		Registration Section Division of Corporations
	Box 6327		The Centre of Tallahassee
Talla	hassee, FL 32314		2415 N. Monroe Street, Suite 81 Tallahassee, FL 32303



2021 FEB -2 PM 5: 54

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)

	iment/registration number assigned to this limited liability company is:
L19000181943	
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:
MANAGER	
	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Le	issociating Member or Resigning Manager
Signature of D	ssociating Member or Resigning Manager
•	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)