

L24000105996

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ROYAL CLASS AIR LLC

(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:

Pamela Agostina Poveda

(Contact Person)

ROYAL CLASS AIR LLC

(Firm/Company)

333 SE 2nd Ave, Suite 2810

(Address)

Miami, Florida, 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

Pamela Agostina Poveda

at (305) 773-2400

(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

2024 OCT 21 PM 1:04

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

**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 Florida Department of State is: ROYAL CLASS AIR LLC

2. The Florida document/registration number assigned to this limited liability company is:
L24000105996

3. The date this member/manager withdrew/resigned or will withdraw/resign is: September 24, 2024

4. I, Roberto Roach Salas, hereby withdraw/resign as a
(Print Name of Person Resigning)
manager
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

A handwritten signature in black ink, appearing to read "Roberto Roach Salas", is written over a horizontal line.

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)