

L24000309686

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
AUG 22 2024

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Florida Flyers Aviation 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:

Cindy Zayas
(Contact Person)

Florida Flyers Aviation LLC
(Firm/Company)

1327 Lake Baton Drive
(Address)

Deltone Florida 32725
(City/State and Zip Code)

For further information concerning this matter, please call:

Cindy Zayas at (863) 409-5953
(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

FILED
2024 AUG 16 AM 10:42
DIVISION OF STATE
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 Florida Department of State is: Florida Flyers Aviation LLC

2. The Florida document/registration number assigned to this limited liability company is: 624000309686

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 8/13/24

4. I, Mauricio Reale, hereby withdraw/resign as a
(Print Name of Person Resigning)

Authorized member
(Print Title)

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

[Signature]
Signature of Dissociating Member or Resigning Manager

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

Included you will find
the same form signed
in front of a notary.
If not needed, please
feel free to discard.
Thank you.



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1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Florida Flyers Aviation LLC

2. The Florida document/registration number assigned to this limited liability company is:
L24000309686

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 8/13/24

4. I, Mauricio C. Reale, hereby withdraw/resign as a
(Print Name of Person Resigning)

Authorized Member
(Print Title)

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


Signature of Dissociating Member or Resigning Manager

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

On this 13th day of August,
2024 Mauricio C Reale
Came in to have Document
Notarized.

CR2E079 (2/14)

State of Florida

