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COVER LETTER

SUBJECT: UNIVERSAL	Name of Corporation)
DOCUMENT NUMBER: LOS	5(de)
The enclosed Officer/Director Resignation	on for a Corporation and fee are submitted for filing.
Please return all correspondence concern	ing this matter to the following:
Nikole Augsten	
(Name of Person)	
Ultra Aviation Services	
(Name of Firm/Company	γ)
PO Box 996548	
(Address)	
Miami, FL 33299	
(City/State and Zip Code)
For further information concerning this m	atter, please call:
Nikole Augsten	at (305) 876-0091
(Name of Person)	(Area Code & Daytime Telephone Number)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Raul R. Dube	, hereby resign as	<u> </u>
	•	(Title)
of UNIVERSAL	AVIATION SERVICES (Name of Corporation)	, INC.
(Document Number, if known	, a corporation organized under the laws	of the State of
FLORIDA	·	

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314