

L86416

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

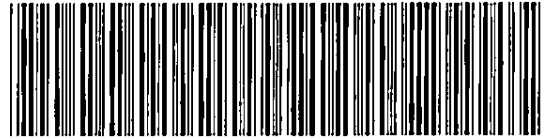
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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500420587635

Resignation of
officer

12/19/23--01013--010 **35.00

FILED
2023 DEC 19 PM 12:51

A. RAMSEY

JAN 23, 2024

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RHODES AVIATION, INC.

(Name of Corporation)

DOCUMENT NUMBER: L86416

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ADRIAN SULLIVAN

(Name of Person)

(Name of Firm/Company)

16924 CORNERWOOD DR

(Address)

ORLANDO, FL 32820

(City/State and Zip Code)

For further information concerning this matter, please call:

ADRIAN SULLIVAN at (321) 332-2779

(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED

2023 DEC 19 PM 12 57


CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT

I, ADRIAN SULLIVAN, hereby resign as TREASURER
(Title)

of RHODES AVIATION, INC.
(Name of Corporation)

L86416, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILING FEE IS \$35.00

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

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