M06000002220

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	≥ #)
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Certified Copies	_ Certificates	of Status
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Connected to administration of the]
Special Instructions to Filing Officer:		
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Office Use Only



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RA Resign

CECRETARY OF STATE

FILED



June 11, 2008

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

RE: Okun Air, LLC

Dear Filing Officer:

Enclosed please find a Resignation of Registered Agent filing form for the above referenced name, which is to be filed in your office at your earliest convenience. Enclosed is check # 14804 in the amount of \$85.00 for the filing fee. Once filed, please return the filed-stamped copy in the self-addressed envelope. If you have any questions please contact the undersigned at (800) 345-4647.

Sincerely,

Rhonda Maybin
Rhonda Maybin

Enclosures

COVER LETTER

TO: Amendment Section Division of Corporations

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SEGAL TARY OF STATE TALL AHASSEE, FLORIDA

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SUBJECT:	Okun Air, LLC
(Nam	ne of Limited Liability Company)
DOCUMENT NUMBER: M06000002	2220
The enclosed Resignation of Registered for filing.	Agent for a Limited Liability Company and fee are submitted
Please return all correspondence concer-	rning this matter to the following:
Rhonda Maybin (Name of Person)	
Capitol Corporate Service (Name of Firm/Compar	es, Inc.
800 Brazos, Suite 40 (Address)	00
Austin, Texas 7870 (City/State and Zip Cod	
For further information concerning this	matter, please call:
Rhonda Maybin (Name of Person)	at (<u>800</u>) 345-4647 (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

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

STREET ADDRESS:

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

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,			
Capitol Corpora	ite Services, Inc.	, hereby resigns as	
	gistered Agent)	,,	
Registered Agent for	Okur	Air, LLC	
(N	Name of Limited Liability Com	ppany)	
M06000002220			
(Document Number, if known)			
A copy of this resignation was maile	d to the above listed limit	ed liability company at its last known address.	
The agency is terminated and the off	ice discontinued on the 31	1st day after the date on which this statement is filed.	
	Hung Do	Mutaning Agent)	
If signing on behalf of an entity:			
	Cheryl Robert	s	
	(Typed or Printed Na		
	President		
	(Capacity)		

FILING FEES:

\$ 85.00 \$ 25.00 Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314