Division of Corporations Electronic Filing Cover Sheet

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(((H15000127290 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

MAY 28 2015

Account Name

: INCORPORATING SERVICES FL

Account Number : 120050000052

Fax Number

; (850)656-7956

R. WHITE

: (850)656-79\$3

Enter the email address for this business entity to be used for future ennual report mailings. Enter only one email address please.

Email Address:_

LLC REGISTERED AGENT RESIGNATION

AVIATION CONSULTING GROUP LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$85.00 |

C

Electronic Filing Menu

Corporate Filing Menu

Help

2 May. 27. 2015 4:10PM

Incorporating Services, LTD.

No. 8540 P. 2

COVER LETTER

H15000127290 3

TO: Registration Section
Division of Corporations

| SUBJECT: AVIATION CONSULTING GROUP LLC | | | | | |
|--|--------------|---|--|--|--|
| Name of Limit | ed Liability | Company | | | |
| DOCUMENT NUMBER: M12000002010 | | | | | |
| The enclosed Resignation of Registered Agent for filing. | r a Limited | Liability Company and fee are submitted | | | |
| Please return all correspondence concerning this t | natter to th | e following: | | | |
| DENELL SPROWL | | | | | |
| Name of Person | | | | | |
| INCORPORATING SERVICES, LTD. | | | | | |
| Name of Firm/Company | | | | | |
| 3500 SOUTH DUPONT HIGHWAY | | | | | |
| Address | | | | | |
| DOVER, DE 19901 | | | | | |
| City/State and Zip Code | - | | | | |
| DSPROWL@INCSERV.COM | | | | | |
| E-mail address: (to be used for future annual report no | tification) | | | | |
| For further information concerning this matter, pl | ease call: | | | | |
| DENELL SPROWL at (| 302 | 531-0707 | | | |
| | Arca 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\$85,00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS:

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

JNHS17 (2/14)

H15000127290 3

May. 27. 2015 4:10PM Incorporating Services, LTD.

No. 8540 P. 3

H15000127290 3

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

| • | rvisions of section 605.0115, Florida Statutes, the un | - | | | |
|----------------------|---|--------------------------------|--|------------------|------------|
| INCORPORAT | ING SERVICES, LTD. | , hereby resigns as | | | |
| | Name of Registered Agent | | | | |
| Registered Agent | or AVIATION CONSULTING GROUP LLC | | | | |
| | | | | | |
| ······· | Name of Limited Liability Company | | - | , | |
| M1200000201 | 0 | | | | |
| Docum | ent Number, if known | | | | |
| A copy of this resid | gnation was mailed to the above listed limited Habili | ity company at its last know | n address. | | |
| • | - | | | | |
| The agency is term | inated and the office discontinued on the 31st day a | Her the data on which this o | tatement is | filled | |
| <u> </u> | Whomas mits min average mineral series and and and | nor the date on willon this s | *********** | *** | |
| | | noi die sale al villeji siis s | | 1004. | |
| - ' | · | W. | -9- | 1204. | |
| | Signature of Resigning Ages | | | <u> </u> | |
| If signing on behal | Signature of Resigning Ages | W. | | उत्ते | |
| If signing on behal | Signature of Resigning Ages | W. | | ~_4 | . <u> </u> |
| If signing on behal | Signature of Resigning Ages | W. | A CONTRACTOR | 15 hái 2 | |
| If signing on behal | Signature of Resigning Ages f of an emilty: AMY BALKE | W. | ALLAN MOST W | St. | |
| If signing on behal | Signature of Resigning Ages f of an entity: AMY BALKE Typed or Printed Name | W. | ALCO ALCO ALCO ALCO ALCO ALCO ALCO ALCO | 15 hái 2 | T. C. |
| If signing on behal | Signature of Resigning Ages f of an emity: AMY BALKE Typed or Printed Name ASSISTANT SECRETARY | W. | ALCO ALCO ALCO ALCO ALCO ALCO ALCO ALCO | 15 hall 27 kg | |
| If signing on behal | Signature of Resigning Ages f of an emity: AMY BALKE Typed or Printed Name ASSISTANT SECRETARY | W. | ALCO ALCO ALCO ALCO ALCO ALCO ALCO ALCO | 15 hall 27 28 9: | |
| If signing on behal | Signature of Resigning Ages f of an emity: AMY BALKE Typed or Printed Name ASSISTANT SECRETARY Capacity FILING FEES: | W 3 | MALLAHROSEE, FLORIDA | 15 hall 27 kg | C |
| If signing on behal | Signature of Resigning Ages f of an emity: AMY BALKE Typed or Printed Name ASSISTANT SECRETARY Capacity FILING FEES: | W. | MALLAHROSEE, FLORIDA | 15 hall 27 28 9: | |

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

INHS17 (2/14)

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