

4/8/2020

Division of Corporations

H20000104971 3

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : 120000000195
Phone : (850)521-0821
Fax Number : (850)558-1515

R. WHITE
APR 09 2020

RECEIVED

2020 APR -8 PM 4:14

LLC DISSOLUTION OR WITHDRAWAL
AIR INSURANCE SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2020 - 8 - 8 PM 8:26

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Air Insurance Services LLC

(Name of Foreign Limited Liability Company)

Dear Sir or Madam,

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following.

(Name of Person)

Corporation Service Company

(Firm/Company)

1201 Hays Street

(Address)

Tallahassee, FL 32301

(City/State and Zip Code)

For further information concerning this matter, please call:

Maria Zavala

(Name of Person)

312

477-5150

at (

_____) _____
(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Air Insurance Services LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

November 8, 2016

(Date registered with Florida Department of State)

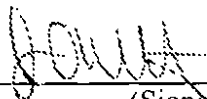
M16000008948

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: upon filing (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.



(Signature of authorized representative)

John M. Albright, Vice President and Secretary

(Typed or printed name of signee)

2020-04-08 08:26

Filing Fee: \$25.00

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