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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

Email	Address:	<u></u>

LLC REGISTERED AGENT RESIGNATION 90PC AIR HOLDINGS, LLC

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COVER LETTER

TO: Registration Section Division of Corporat	ions	
SUBJECT: 90PC AIR HOL		lity Company
DOCUMENT NUMBER:	W2000000301	
The enclosed Resignation of for filing.	Registered Agent for a Lim	ited Liability Company and fee are submitted
Please return all corresponde	ence concerning this matter t	o the following:
Erika Easter		
Name	of Person	
eResidentAgent, Inc.		
Name of F	irm/Company	
228 Park Ave S, PMB 508	345	
Ad	dress	
New York, NY 10003-150	2	
City/State	and Zip Code	
E-mail address: (to be used f	or future annual report notification	1)
For further information conc	erning this matter, please ca	11:
Erika Easter	310	⁸²⁰⁻¹⁰⁰⁰
Name of Perso	on Area Co	820-1000 de Daytime Telephone Number
Enclosed is a check made pa liability company or \$25.00 t liability company.	yable to the Florida Departn for an administratively disso	nent of State for \$85.00 for an active limited lived, voluntarily dissolved or withdrawn limited

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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605.0115,	Florida Statutes, the und	ersigned,	, B. 1
eResidentAgent,	nc.		, hereby resigns as	AND HAY
	Name of Registered Agent			
Registered Agent for	90PC AIR HOLDING	S, LLC		2
				بي
13-007	Name of Limite	d Liability Company	71.7	ڊي ع
M20000005561				<u> </u>
Document 3	Sumber, if known			
	ion was mailed to the about			
	- CSignal	tule of Resigning Agent)		
If signing on behalf of	an entity:			
	Jeffrey A Unger			
	Турк	ed or Printed Name		
	President			
		Canadia		

FILING FEES:

\$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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