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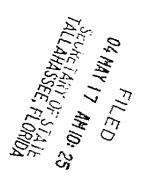


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TRANSMITTAL LETTER

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SUBJECT: SOUTHEASTERN AVIATION GROUP & SA (Name of Corporation)	on)			•	•
DOCUMENT NUMBER: P02000093868	x t, 15		<u>. </u>		, <u>.</u>
The enclosed Resignation of Registered Agent for a Corpora	tion and fee are sub	nitted f	or filing		
Please return all correspondence concerning this matter to the	e following:				
MARK VIOLETTE	A	, -	•	. 1	, ÷
(Name of Person)	-		₹o::	0	
MARK A. VIOLETTE, P.A.			ES	II 7	
(Name of Firm/Company)		-	HA:	-	T
34990 EMERALD COAST PARKWAY, SUITE 403	u than bart		RY O	7 AH 10: 25	FILED
(Address)			FSI	0	U
DESTIN, FLORIDA 32541				25	
(City/State and Zip Code)			>		
For further information concerning this matter, please call:					
MARK VIOLETTE at (850)	654-0068		**	7	
(Name of Person) (Area Code	& Daytime Telephone	Numbe	r)		

or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 66	07.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, MA	ARK VIOLETTE, P.A.
	(Name of Registered Agent)
hereby resigns as Registered Agent for	Southeastern Aviation Group & Sales, Inc.
	(Name of Corporation)
P02000093868	en anno 1975 de la companya del companya de la companya del companya de la compan
(Document Number, if known)	
A copy of this resignation was mailed to	the above listed corporation at its last known address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date on which
Mai	Wilde
(Sig	gnature of Resigning Agent)
If signing on behalf of an entity:	O4 HAY TALLAH
C	Typed or Printed Name) ASSE OF SI
	(Capacity)

Fee for filing this document: \$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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