

CJ

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: THOMPSON AVIATION SERVICES INC
(Name of Corporation)

DOCUMENT NUMBER: P06000129517

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

CECIL WILSON
(Name of Contact Person)

CEE JAY ENTERPRISES INC
(Firm/Company)

8870 TRILBY AVENUE
(Address)

JACKSONVILLE, FLORIDA 32222
(City/State and Zip Code)

For further information concerning this matter, please call:

CECIL WILSON at (904) 771-3160
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

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

