P2000080031

(Requestor's Name)		
(Address)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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2024 AUS 20 Thi 5: 55 ATT THE STATE OF THE

AUG 2 7 S. PRATHER

COVER LETTER

(Name of Person)	at () (Area Code & Daytime Telephone Number)
David H. Abrams	407-385-0529
For further information concerning	this matter, please call:
(City/State and Zi	p Code)
Orlando, FL 32801	
(Address)	
200 N. Thornton Avenue	
(Name of Firm/Co	ompany)
Law Office of David II. Abrams	
(Name of Pers	son)
David H. Abrams, Esq.	
Please return all correspondence co	oncerning this matter to the following:
The enclosed Resignation of Regist	ered Agent for a Corporation and fee are submitted for filing.
DOCUMENT NUMBER: P20000086	00.1
P2000008	(Name of Corporation)
SUBJECT: Flying Fraternity, Inc.	
Division of Corporations	
TO: Amendment Section	

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

•	ons 607.0503(2), 617.0502(2), 607.1509, o	r 617.1509、
lorida Statutes, the undersigned, David H. Abrams, Esq.		
S	(Name of Registered Agent)	
hereby resigns as Registered Agen	Flying Fraternity, Inc.	
noted y resigns as registered rigen	(Name of Corporation)	
P20000080031		
(Document Number, if known)		
The agency is terminated and the of this statement is filed.	iled to the above listed corporation at its last office discontinued on the 31st day after the	e date on which
/a vavia }	H. Abrama (Signature of Resigning Agent)	2024 7 1.1.
	(Signature of Resigning Agent)	.: 🐺
If signing on behalf of an entity:		
		• •
		n,
	(Typed or Printed Name)	ن - ن
		. ర
·	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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. Box 6327
Tallahassee, FL 32314