P22000005728

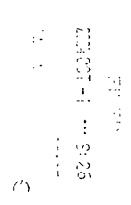
(Re-	questor's Name)		
(Add	dress)		
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(City	y/State/Zip/Phone	e #) ¯	
☐ PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nam	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
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100437135191





COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Strong Rock Aviation, Inc.	(Name of	Corpora	ation)
DOCUMENT NUMBER: P22000005728			
The enclosed Resignation of Registered A	gent for a	Corpo	ration and fee are submitted for filing.
Please return all correspondence concerni	ng this ma	itter to	the following:
Scott C. Burgess			
(Name of Person)			<u> </u>
Aviation Legal Group, P.A.			
(Name of Firm/Company)		_
888 S. Andrews Avenue, Suite 303			
(Address)	, ,· -		_
Fort Lauderdale, FL 33316			
(City/State and Zip Code))		_
For further information concerning this m	atter, plea	se call:	
Allison Sass	at (763-5565 _)
(Name of Person)	(A	rea Coc	le & Daytime Telephone Number)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

<u>-</u>	ons 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	Aviation Legal Group, P.A.
rioned statutes, the undersigned	(Name of Registered Agent)
hereby resigns as Registered Agen	Strong Rock Aviation, Inc.
nerelly resigna as registered regel	(Name of Corporation)
P22000005728	
(Document Number, if known)	
A copy of this resignation was ma	iled to the above listed corporation at its last known address.
The agency is terminated and the of this statement is filed.	Office discontinued on the 31st day after the date on which (Signature of Resigning Agent)
If signing on behalf of an entity:	- []
Scott Burgess	· (*)
	(Typed or Printed Name)
President	
	(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