P24000041812

(Requestor's Name)			
(Address)			
(Address)			
(City(Class (Zis (Dlass a 4)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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AUS. S. BORNE			
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations			
SUBJECT:	4 Avionies Corporation	n	
SOBJECT		(Name of Corporation)	
DOCUMENT NUMBI	ER: P24000041812		
The enclosed Officer/D	irector Resignation	for a Corporation and fee are submitted for filing	
Please return all corresp	ondence concerning	g this matter to the following:	
Ricardo Linares			
(1	Name of Person)	· · · · · · · · · · · · · · · · · · ·	
(Nam	e of Firm/Company)		
7370 NW 35 Street			
	(Address)		
Miami, Florida 33122			
(City/	State and Zip Code)		
For further information	concerning this mat	iter, please call:	
Jose Jimenez		at (202 952-9886) (Area Code & Daytime Telephone Number)	
(Name o	Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for	\$35.00 made payabl	le to the Florida Department of State.	
Mailing Address:		Street Address:	
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	
Tallahassee, FL	32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



Ricardo Linares I,	, hereby resign as
.,	(Title)
AT4 Avionics Corporation	
(Nan	ne of Corporation)
P24000041812	a corporation organized under the laws of the State of
(Document Number, if known)	
Florida	
	 ;
	Lucia
	(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314