P32673

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TALLMAYSSEE, FLORIDA

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C. CARROLA

COVER LETTER

	nendment Section rision of Corporations		
SUBJECT	: Continental Aviati		
		(Name of Corporation	1)
DOCUME	INT NUMBER: P32673		
The enclos	ed withdrawal application and f	ee are submitted for fi	ling.
	m all correspondence concerning he following:	this	
	Jam	es P. Lennane	
	·	(Name of Person)	
_		(Firm/Company)	
	2430 Vanderbilt Beac	h Rd. Ste. 108	-353
_		(Address)	
	Waster	tr 5/105	
_		FL 34109 ity/State and Zip code	
	(0		
For further	information concerning this matt	er, please call:	
James	P. Lennane	at(239)	732-5500
	(Name of Person)	(Area Cod	e & Daytime Telephone Number)
Enclosed i	s a check for the amount:		
\$35 Fil	ing Fee X \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)	\$52.50 Filing Pee, Certificate of Status & Certified Copy (Additional copy is enclosed)
	MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314		STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL. 32301

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APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

	Continental Aviation Servi (Name of Corporation	ices Inc.
	P32673	
	(Document Number of Corporatio	n (if known)
		s of)
	poration is no longer transacting business or conducting ily surrenders its authority to transact business or conduc	
appoints	poration revokes the authority of its registered agent i the Department of State as its agent for service of pro- it was authorized to transact business or conduct affairs	cess based on a cause of action arising during
The follo	owing is a current mailing address for the corporation;	
	2430 Vanderbilt Beach Rd. Ste 10	08-353
	(Mailing Address)	
	· Naples, FL 34109	
	(City/State/Zip)	Thomas 3
The corp	oration agrees to notify the Department of State in the fi	iture of any change in its mailing address.
	W fem	5/13/14
Ţ,	Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
	James P. Lennane	President
_	(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35