

P 95000020254

HOLTZMAN, KRINZMAN, EQUELS & FURIA  
ATTORNEYS AT LAW  
2601 SOUTH BAYSHORE DRIVE  
SUITE 600  
MIAMI, FLORIDA 33133  
TELEPHONE (305) 859-7700  
TELEFAX (305) 859-9996

FILED  
99 MAR 18 PM 3:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

| NEW FILINGS              |                   |
|--------------------------|-------------------|
| <input type="checkbox"/> | Profit            |
| <input type="checkbox"/> | NonProfit         |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication     |
| <input type="checkbox"/> | Other             |

| AMENDMENTS               |  |
|--------------------------|--|
| <input type="checkbox"/> | Amendment                              |
| <input type="checkbox"/> | Resignation of R.A., Officer/ Director |
| <input type="checkbox"/> | Change of Registered Agent             |
| <input type="checkbox"/> | Dissolution/Withdrawal                 |
| <input type="checkbox"/> | Merger                                 |

300002878813--8  
-05/18/99--01055--003  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
| <input type="checkbox"/>       | Foreign             |
| <input type="checkbox"/>       | Limited Partnership |
| <input type="checkbox"/>       | Reinstatement       |
| <input type="checkbox"/>       | Trademark           |
| <input type="checkbox"/>       | Other               |

off Res  
5-25-99  
PMS

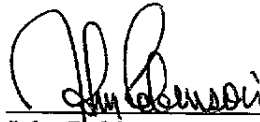
FLORIDA DEPARTMENT OF STATE, KATHERINE HARRIS, SECRETARY OF STATE

AFFIDAVIT OF RESIGNATION OF OFFICER AND/OR DIRECTOR

STATE OF FLORIDA  
COUNTY OF DADE

I, JOHN ROBINSON, after being duly sworn, state that to the best of my knowledge, information and belief, and under the penalties of perjury, the following is true and correct:

1. I hereby resign as Vice President of SPECIALTY AVIATION SALES & SERVICES, INC., a Florida corporation (Document Number P95000020254); and
2. That the corporation has been notified in writing of the resignation pursuant to §607.0807, Florida Statutes.

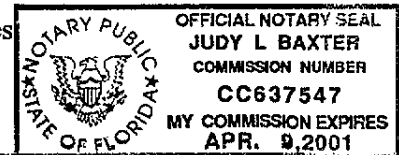
  
John Robinson

THE FOREGOING INSTRUMENT was acknowledged before me on this 14<sup>th</sup> day of May, 1999, by John Robinson, who is personally known to me or who has produced \_\_\_\_\_ as identification.

NOTARY PUBLIC, STATE OF FLORIDA

Signed: Judy L Baxter  
Print: JUDY L BAXTER

My commission expires



DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314