

PA5000052030

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

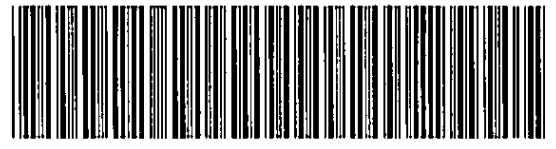
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SEP 21 2017

SECRETARY OF STATE  
FLORIDA

17 SEP 20 AM 10:36

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**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ABOVE AIR, INC.

(Name of Corporation)

**DOCUMENT NUMBER:** P95000052030

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**BRYAN POLLAK**

(Name of Person)

**ABOVE AIR, INC.**

(Name of Firm/Company)

**1490 SW 1ST WAY**

(Address)

**DEERFIELD BEACH, FL 33141**

(City/State and Zip Code)

For further information concerning this matter, please call:

**BRYAN POLLAK**

(Name of Person)

at ( **954** ) **336-5252**

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, CHRIS MARINO, hereby resign as PRESIDENT  
(Title)

of ABOVE AIR, INC.  
(Name of Corporation)

P95000052030, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA