PAddress DD 49 40

City/State/Zip

Phone #

Office Use Only

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

| 1. | | | | |
|----------------------------------|---------------|---------|---|-----------------------|
| (Corporation Name) | | | (Document #) | · · |
| 2 | | <u></u> | | 7000044500778 |
| (Corporation Name) | | | (Document #) | *****35.00 *****35.00 |
| 3. | | | | |
| (Corporation Name) | | | (Document #) | No. 2 |
| 4 | | | | |
| (Corporation Name) | | | (Document #) | D/s |
| ☐ Walk in ☐ | Pick up time | | | Certified Copy |
| ☐ Mail out | Will wait | ☐ P | hotocopy | Certificate of Status |
| NEW FILINGS | - | AM | ENDMENTS | |
| Profit | - | | Amendment | |
| Not for Profit Limited Liability | , | | Resignation of R.A. Change of Registered | , Officer/Director |
| Domestication | | | Dissolution/Withdra | |
| Other | | | Merger | ,0 ~ |
| OTHER FILINGS | | REC | GISTRATION/QUA | ALIFICATION JON OF |
| Annual Report Fictitious Name | | | Foreign Limited Partnership Reinstatement Trademark Other | 60400000 |
| | | | | Examiner's Initials |

OFFICER / DIRECTOR RESIGNATION

| I, JOANNA RUSSO, hereby resign as Director (Tide) | • |
|--|---------------|
| of BPI Aerospace Corporation (Dat P98000) | 200494C |
| a corporation organized under the laws of the State of FLORIDA | O TI |
| and affirm that the corporation has been notified in writing of the resignation. Signature of resigning officer/director) | 128 PM 12: 42 |

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314