

99900004278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

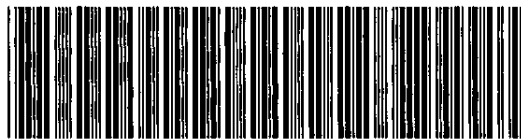
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300240546003

10/18/12--01013--023 **35.00

FILED
12 OCT 18 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ODR

OCT 18 2012

C. MUSTAIN

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AIR TAXI, INCORPORATED
(Name of Corporation)

DOCUMENT NUMBER: P99000004278

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

Please return all correspondence concerning this matter to the following:

TOM SEPTEMBRE

(Name of Person)

FRANK WOLLAND, ESQ.

(Name of Firm/Company)

12865 WEST DIXIE HIGHWAY, SECOND FLOOR

(Address)

NORTH MIAMI, FLORIDA 33161

(City/State and Zip Code)

For further information concerning this matter, please call:

TOM SEPTEMBRE

(Name of Person)

at (305) 899.8588

(Area Code & Daytime Telephone Number)

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

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

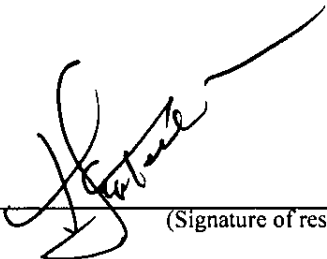
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, E THOMAS SEPTEMBRE, hereby resign as DIRECTOR
(Title)

of AIR TAXI, INCORPORATED
(Name of Corporation)

P99000004278, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILED
12 OCT 18 AM 10:12
TALLAHASSEE, FLORIDA

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