

P99000020138

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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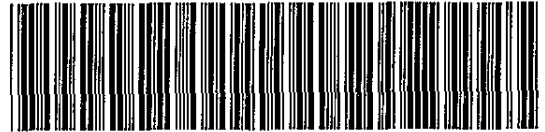
(Business Entity Name)

(Document Number)

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04 APR 19 PM 4:30
TALLAHASSEE, FLORIDA

RA/Res
4/27/04

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: L& N AVIATION, INC.

(Name of Corporation)

DOCUMENT NUMBER: P99000020138

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARY F. FENDLE, PARALEGAL

(Name of Person)

DEAN, MEAD, EGERTON, ET AL.

(Name of Firm/Company)

P. O. BOX 2346

(Address)

ORLANDO, FL 32802-2346

(City/State and Zip Code)

For further information concerning this matter, please call:

MARY F. FENDLE

(Name of Person)

at (407) 428-5119

(Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

FILED
04 APR 19 PM 4:30
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

FILED
04 APR 19 PM 4:30
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, DEAN MEAD SERVICES, LLC
(Name of Registered Agent)

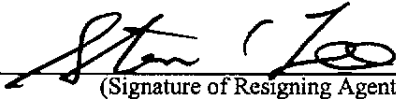
hereby resigns as Registered Agent for L & N AVIATION, INC.
(Name of Corporation)

P99000020138

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.


(Signature of Resigning Agent)

If signing on behalf of an entity:

STEVEN C. LEE

(Typed or Printed Name)

DEAN MEAD SERVICES, LLC

BY: DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A., MEMBE
BY: VICE PRESIDENT

(Capacity)

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

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