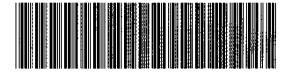
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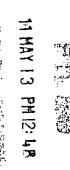
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| Special Instructions to Filin | g Officer: | | | | |
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Office Use Only



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COVER LETTER

| TO: Amendment Section Division of Corporations |
|--|
| SUBJECT: Tranquility Balloon Rides, INC. (Name of Corporation) |
| DOCUMENT NUMBER: P99000102161 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing |
| Please return all correspondence concerning this matter to the following: |
| Edgar York (Name of Person) |
| Tranquilly Balloon Ride Suc (Name of Firm/Company) |
| 5400 Joyner AVE (Address) |
| Spring Hill FL 34608 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Edgar York at (813) 245-4268 (Name of Person) (Area Code & Daytime Telephone Number) |

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

Exception property

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, _ | Jill S. YORK | , hereby resign as | VICEPre | <u>(Title)</u> | <u>+</u> | _ | |
|------|------------------------------------|-------------------------------|------------------|----------------|----------|----|--|
| of_ | Tranquility Ballo | on Rides, In | ve. | <u> </u> | | _, | |
| | (Document Number, if known) . a co | orporation organized ur | nder the laws of | the State of | of | | |
| | Florida. | | | să. | | | |
| | | | | | 11 HAY | | |
| | $\bigcap_{i} A_{i}$ | e S. Work | | | 13 PM | | |
| | (Signatur | re of resigning officer/direc | tor) | | 112: 48 | | |

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