P15000003896

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
etified Copies	Certificates of Status
Special Instructions to	Filing Officer:

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A. BUTLER NOV 2 4 2022 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

PHONE: 850-	330-1300					
	ACCOUNT NO.	:	1200000001	.95		
	REFERENCE	:	896787	8323810		
	AUTHORIZATION	:	- Sage 18	Censo		
	COST LIMIT	:	\$ 35.00			
ORDER DATE	: July 8, 2021					
ORDER TIME	: 1:26 PM					
ORDER NO.	: 896787-085					
CUSTOMER NO	9: 8323810					
RESIGNATION OF AGENT FILING						
NAME: MIAMI HELICOPTER, INC.						
XX RESIG	NATION AGENT					
PLEASE RETU	RN THE FOLLOWING AS	PRO	OOF OF FILI	NG:		
XX PLA	TIFIED COPY IN STAMPED COPY TIFICATE OF GOOD ST	'AND	ING			
CONTACT PER	SON: ALEXXIS WEILA	ND				

EXAMINER'S INITIALS:

COVER LETTER

TO: Amendment Section Division of Corporations	
MIAMI HELICOPTER, INC.	
((Name of Corporation)
DOCUMENT NUMBER: P15000003896	
The enclosed Resignation of Registered Ag	gent for a Corporation and fee are submitted for filing.
Please return all correspondence concernin	ng this matter to the following:
RESIGNATION DEPARTMENT	
(Name of Person)	
CORPORATION SERVICE COMPANY	
(Name of Firm/Company)	
251 LITTLE FALLS DRIVE	
(Address)	
WILMINGTON, DE 19808	
(City/State and Zip Code)	·
For further information concerning this ma	itter, please call:
RESIGNATION DEPARTMENT	800 927-9801 at ()
(Name of Person)	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	ons 607.0503(2), 617.0502(2), 607.1509, or 61	7.1509.				
orida Statutes, the undersigned, CORPORATION SERVICE COMPANY						
. Total olimaton the thibething.	(Name of Registered Agent)					
hereby resigns as Registered Agen	MIAMI HELICOPTER, INC.					
neredy resigna as registered rigen	(Name of Corporation)					
P15000003896						
(Document Number, if known)						
A copy of this resignation was ma	iled to the above listed corporation at its last ki	nown ad	dress.			
The agency is terminated and the of this statement is filed. Uly	office discontinued on the 31st day after the day wis Weiland, assistant va president	te on wh	12 AON 2552	72 ₁ 52 71 2344 71 2444		
	(Signature of Resigning Agent)			1		
If signing on behalf of an entity:		JESTAE	112: 50	J		
BY ALEXXIS WEI	LAND					
	(Typed or Printed Name)					
ASSISTANT 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