

FD1000002058

(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



700209815397

RECEIVED  
SHREVEPORT OFFICE  
DIVISION OF STATE  
DEPARTMENT OF REVENUE  
DIVISION OF CORPORATIONS  
11 JUL 25 PM 1:06  
2011 JUL 25 AM 10:46  
NOT INTENDED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

R.A. Chy  
C.COULLIETTE

JUL 25 2011

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 854589 4321720

AUTHORIZATION

COST LIMIT : \$ 35.00

ORDER DATE : July 22, 2011

ORDER TIME : 10:20 AM

ORDER NO. : 854589-002

CUSTOMER NO: 4321720

CHANGE OF AGENT

NAME: AIRTRAN AIRWAYS 717 LEASING  
CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd

EXAMINER'S INITIALS: \_\_\_\_\_

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: AIRTRAN AIRWAYS 717 LEASING CORPORATION

2. The principal office address: \_\_\_\_\_  
9955 Airtran Boulevard, Orlando, FL 32827

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 04/17/2001 Document number: F01000002058

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

C T Corporation System

1200 South Pine Island Road

Plantation, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

(P.O. Box NOT acceptable)

Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

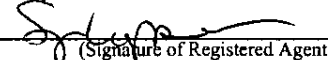
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

Modelaine Johnson, Assistant Secretary  
(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

Corporation Service Company

  
(Signature of Registered Agent)

7-22-2011  
(Date)

If signing on behalf of an entity:

Sylvia Queppet, Asst. VP

(Typed or Printed Name)

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (8/05)

11 JUL 25 PM 1:06

FILED  
OFFICE OF SECRETARY OF STATE  
DIVISION OF CORPORATIONS