F14 000000 833

(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:					
Special instructions to ruing Officer.					

Office Use Only



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SECRETARY OF STATE
FALL AHASSEE, FLORIDA

AUS OF FINER



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Seeman ashley.seeman@cscglobal.com

Date: July 31, 2019

Order#: 851349-002

Re: MIDNITE AIR CORP.

Enclosed please find:

XX ___ Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX __ Issue Proof of Filing.

XX _ Please return evidence to the following:

Attn: Ashley Seeman c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	provisions of sections 607.0502, 617 nge is submitted for a corporation o	rganized under the la	ws of the State of	CA	_
	r to change its registered office or re MIDNITE AIR CORE		n, in the state of	rioriaa.	
1. The name of t	he corporation: MIDNITE AIR CORF				
2. The principal	office address: 8200 NW 27TH STR	EET SUITE 101 DOF	KAL, FL 33122		
3. The mailing a	ddress (if different): 5001 Airport Pl	aza Drive Suite 250 L	ong Beach, CA 9	30815	
4. Date of incorp	poration/qualification: 02/21/2014	Document	number: F14000	000833	
	street address of the current register trnent of State: (If resigned, enter res		ed office on file v	vith the	
	C T CORPORATION SYSTEM			_	
	1200 SOUTH PINE ISLAND ROAL	PLANTATION, FL 3	3324	_	
		·	. 	19 SE 1	
6. The name and (if changed):	street address of the new registered	agent (if changed) an	d /or registered o	772	7
	Corporation Service Company		<u></u>	:::: :∪:::æ	
	1201 Hays Street				
		NOT acceptable	00004	INTE	
	Tallahassee	FL	32301	∑	
The street addre	ss of its registered office and the st be identical.	reet address of the bu	siness office of i	ts registered ag	ent,
Such change wa authorized by th	s authorized by resolution duly ado e board, or the corporation has bee	pted by its board of d n notified in writing o	lirectors or by an of the change.	officer so	
Thomas A. Belmont, COO			mont, COO		
Signatur	e of an officer or director	Printe	ed or typed name and to	ile	_
I further agree to performance of agent. Or, if this hereby confirm to	the appointment as registered agen o comply with the provisions of all my duties, and I am familiar with a s document is being filed merely to that the corporation has been notifi n Service Company	statutes relative to th nd accept the obligat reflect a change in th	le proper and cor ion of my position he registered offic	n as registered	
By: Dra	see C. Kubi	07/18/20	19		
	nature of Registered Agent		Date	<u> </u>	_
If signing on bel	half of an entity:				
Grace E. Kirby,	Asst. Vice President				
· T ₃	ped or Printed Name				

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