(Requestor's Name)					
(Address)					
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TO:

TO:	Amendment Section Division of Corporations	
SUBJ Name	IECT: AEML, Inc	
	P06000051885	
DOC	UMENT NUMBER: P06000051885	
The e	nclosed Statement of Change of Registered	I Office/Agent and fee are submitted for filing.
Please	e return all correspondence concerning this	matter to the following:
Ronal	id Mazur	
Name	of Contact Person	
AEM	L, Inc.	
Firm/	Company	
601 E	Atlantic Blvd.	
Addre	ess	
Pomp	ano Beach, FL 33060	
City/S	State and Zip Code	
	rmazur@aemline.com	
E-ma	ail address: (to be used for future annual	report notification)
For fi	urther information concerning this matter, p	blease call:
Ronal	ld Mazur	at (954) 333-8149 Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclo	osed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address:
		Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

$\dot{\text{S}}\textsc{tatement}$ of change of registered office or registered agent or both for corporations

statement of cha	provisions of sections 607.0502, 617.0. inge is submitted for a corporation org r to change its registered office or regi	anized under the laws o	of the State of <u>FC</u>	ORIDA
	the corporation: AEML. Inc	 		
	office address: 601 E Atlantic Blvd.			
3. The mailing a	iddress (if different):			
4. Date of incorp	nber: P06000051885			
	I street address of the current registered timent of State: (If resigned, enter resig		ffice on file with the	
	Ronald Mazur			
	1301 E Atlantic Blvd.			2019 r
	Pompano Beach, FL 33060			14.5 2.5
6. The name and (if changed):	r registered office	:OI HW - L2 cou 6102		
	Ronald Mazur	 		ন - গ্ৰে
		0.		
	PO I Pompano Beach, FL 33060	Box NOT acceptable		
	ess of its registered office and the stre be identical.			
Such change wa authorized by th	as authorized by resolution duly adoptic board, or the corporation has been	ted by its board <mark>of dire</mark> notified in writi <mark>ng of t</mark> l	ctors or by an officer he change.	SO
fla	region of Disso or director	Ronald Mazur	PRESIDENT	
I hereby accept I further agree of my duties, an document is bei	the appointment as registered agent of comply with the provisions of all stand I am familiar with and accept the one filed merely to reflect a change in a been notified in writing of this change.	and agree to act in this atutes relative to the p bligation of my positio the registered office a	s capacity.	performance t. Or if this irm that the
Ar		12/24/2019		
Signature of Registered Agent		Date		
If signing on be	half of an entity:			
Т	vped or Printed Name			

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