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R. WHITE SEP 17 2018 1018 SEP | 2 AM 9: 20 BECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: Adventure Air, Inc.					
Name of Corporation					
DOCUMENT NUMBER: P98000040178					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Arthur C Stifel, IV					
Name of Contact Person					
Firm/Company					
1179 US Hwy 27 S					
Address					
Sebring, FL 33870					
City/State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Arthur C Stifel IV Name of Contact Person Area Code & Daytime Telephone Number					
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a \$35.00 check made payable to the Department of State.					
Mailing Address: Amendment Section Amendment Section Amendment Section					

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of change is submit	tted for a corporation orga	502, 607.1508, or 617.1508, F anized under the laws of the St stered agent, or both, in the St	tate of Florida	
1. The name of the corporation	on: Adventure Air,	Inc.		
2. The principal office address		n Park Executive Airp	port	
3. The mailing address (if dif Lorida, FL 3385	ferent): PO Box 261			
4. Date of incorporation/qual	ification: 5/4/1998	Document number:	P98000040178	
	ss of the current registered	agent and registered office or		
Chapma	an & Morris Acctg.			
150 Da	II Hall Blvd			
Lake Pl	acid, FL 33852			
6. The name and street address of the new registered agent (if changed) and /or registered of fifther (if changed): Arthur C Stifel, IV				
	S Hwy 27 S		AHAS	
 	P.O. Box NO 1, FL 33870	T acceptable	OF STATE	
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 authorized by the board, or (by resolution duly adopte te, corporation has been n	ed by its board of directors or otified in writing of the chan	by an officer so ge.	
Arthur C Stifel, IV Officer/Director Signature of in other or director Printed or typed name and title				
A furthér agréè to comply wit	th the provisions of all sta ad I am familiar with and	nd agree to act in this capace tutes relative to the proper a accept the obligation of my p flect a change in the register in writing of this change.	nd complete position as registered	
Signature of Register	M A Agent	September 1	0, 2018	
H signing on behalf of an ent	Still			

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