646514

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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Submood Emily Hamle)
(Document Number)
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EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations		
suвject: <u>Miracle Strip Avia</u>	tion, Inc. (Name of Corporati	on)
DOCUMENT NUMBER: 646514	·	
The enclosed Statement of Change of	Registered Office/Agent	and fee are submitted for filing.
Please return all correspondence conce	erning this matter to the f	ollowing:
Kelly (G. Helmstetter / Corp (Name of Contact Per	orate Paralegal son)
	Kevin M. Helmich (Firm/Company)	n, P.A.
	Post Office Box (Address)	5499
	Destin, Florida 325 (City/State and Zip Co	540-5499 ode)
For further information concerning this	matter, please call:	
Kevin M. Helmich (Name of Contact Perso	on) at (850) 650.4747 rea Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payal	ole to the Department of	State.
Mailing Address Amendment S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

;TO:

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 Florida	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Miracle Strip Aviation, Inc.	
2. The principal office address: 1001 Airport Road, Destin, Florida 32541	
3. The mailing address (if different): Post Office Box 159, Destin, Florida 32540	_
4. Date of incorporation/qualification: 12/01/1979 Document number: 646514	_
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
Kelvin E. Espada, Jr.	
1001 Airport Road	
Destin, Florida 32541	
5. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	ľ
Kevin M. Helmich, Esquire	S.
4481 Legendary Drive, Suite 200 (P.O. Box NOT acceptable)	ŀ
Destin, Florida 32541	
The street address of its registered office and the street address of the business office of its registered agent, is 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.	
C + 10 Mt C 5 L B V AN ATTA (Signature of an officer or director) C 5 L B V Printed or typed name and title)	
hereby accept the appointment as registered agent and agree to act in this capacity, further agree to comply with the provisions of all statutes relative to the proper and complete performance if my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this ocument is being filed merely to reflect a change in the registered office address, I hereby confirm that the orporation has been notified in writing of this change.	
(Signature of Registered Agent) (Date)	
f signing on behalf of an entity:	
(Typed or Printed Name)	

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