

838891

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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*R/ACHG*

To: Division of Corporations  
Fax Number : (850)617-6380

APR 20 2015

R. WHITE

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850)205-8842  
Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

REGISTERED AGENT CHANGE  
AIRBUS AMERICAS CUSTOMER SERVICES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

RECEIVED  
15 APR 17 PM 1:59  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

15 APR 17 AM 9:05  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA  
P41107D

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**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: Alibus Americas Customer Services, Inc.
- 2. The principal office address: 4355 NW 36 Street, Miami, FL 33166
- 3. The mailing address (if different): 2550 Wasser Terrace, Suite 9100, Herndon, VA 20171
- 4. Date of incorporation/qualification: 08/05/1977 Document number: 838891

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)

CT Corporation System  
1200 S. 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):

NRAI Services, Inc.  
1200 South Pine Island Road  
P.O. Box NOT acceptable  
Plantation, FL 33324

15 APR 17 AM 9:05  
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STATE DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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

Robert A. Geckle, Jr., VP Legal, GC & 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.

  
\_\_\_\_\_  
Signature of the Registered Agent

Michele Holden,  
Assistant Secretary      04/17/2015  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

Robert A. Geckle, Jr.  
\_\_\_\_\_  
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  
CR2ED45 (03/12)