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To:

Division of Corporations

Fax Number

15129570210

: (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

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 AAA AIR EXPRESS OF MIAMI, LTD., INC.

	Certificate of Status	0
	Certified Copy	0
	Page Count	03
•	Estimated Charge	\$35.00

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COVER LETTER.

TO:

Amendment Section Division of Corporations

15129570210

SUBJECT: AAA AIR EXPRESS OF MIAMI, LTD.,					
Name of Corporation					
DOCUMENT NUMBER:	855486				

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:

Joshua Murphy		
Name of Contact Person		
Registered Agent Solutions, Inc.		
Firm/Company		
Corporate Center One, 5301 Southwest Pkwy, Sto	: 400	
Address		
Austin, Texas 78735		
City/State and Zip Code		
E-mail address: (to be used for future ann	ual report notification)
For further information concerning this matte	r, please call:	
Joshua Murphy	at (888	705-7274

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Name of Contact Person

Amendment Section
Division of Corporations
The Centre of Tallahassee

Area Code & Daytime Telephone Number

2415 N. Monroe Street, Suite 810

Taliahassee, FL 32303

Street Address:

CR2E045 (04/13)

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

statement of cha	provisions of sections 607.0502, 6 inge is submitted for a corporation ir to change its registered office or	organized u	nder the la	ws of the State	of New	York	
	the corporation: AAA AIR EXF office address: 3333 NEW HYDE					Y 11042	<u> </u>
3. The mailing a	address (if different):						_
4. Date of incorp	poration/qualification: 2/9/1983	<u> </u>	Document	number: <u>855</u>	486		
	d street address of the current registrement of State: (If resigned, enter in VECCHIONE, RO	tered agent a resigned)					
	3333 New Hyde Park Rd 3						
	New Hyde Park		FL	11042			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Registered Agent Solutions, Inc.					d office	SECRETAR TALLAHASS	7027 JUN 28
	155 Office Plaza Dr.		Suite A			<u>:-:</u> `	
	Tallahassee	P.O. Box NOT a	3230	1			PM 12: 54
-	ess of its registered office and the be identical. as authorized by resolution duly a he board, or the corporation has be						ent,
	t Vecchione	Rob	ert Vec			Preside	nt
hereby accept further agree of my duties, an document is bei corporation has	the appointment as registered ag to comply with the provisions of a ad I am familiar with and accept to ing filed merely to reflect a chang s been notified in writing of this co	e in increvi	ee to act in elative to t n of my po	nted or typed name: this capacity, he proper and sition as regis ce address, I h	complete tered aver	performa nt. Or, if i firm that	nce this the
Moder	<u> </u>	06	/27/202				
•	nature of Registered Agent			Date			
	half of an entity:						
	Assistant Secretary yped or Printed Name						
•	•	VC FFF. C	5 M * * *				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)