851 MO

	(Requestor's Name)	··		
	(Address)			
	,			
	(Address)			
	(City/State/Zip/Phone #)			
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PICK-UP	WAIT	MAIL		
	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 548579 8363422					
AUTHORIZATION :					
COST LIMIT : \$ 35.00					
ORDER DATE: March 14, 2022					
ORDER TIME : 9:57 AM					
ORDER NO. : 548579-023					
CUSTOMER NO: 8363422					
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					
CHANGE OF AGENT					
NAME AMERICAN ATRITAGE TAG					
NAME: AMERICAN AIRLINES, INC.					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Eyliena Baker					
EXAMINER'S INITIALS:					

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

statement of cha	nge is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida Sta organized under the laws of the State of $\frac{D}{}$ registered agent, or both, in the State of Flo	elaware
1. The name of:	the corporation: _AMERICAN AIRL	INES, INC.	
2. The principal	office address: 1 Skyview Drive, M	1D8B503, Corporate Secretary, Fort Worth	i, TX 76155
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 07/25/1983	Document number: 857190	<del> </del>
	d street address of the current register rtment of State: (If resigned, enter re	ered agent and registered office on file with esigned)	the
	C T Corporation System		
	1200 S. Pine Island Road		
	Plantation	FL 33324	2022 Çı
6. The name and (if changed):	d street address of the new registered	d agent (if changed) and /or registered office	1922 K.I.P. 22
	Corporation Service Company		7779
	1201 Hays Street		
	P	P.O. Box NOT acceptable	
	Tallahassee	FL 32301	
The street addresses changed will	ess of its registered office and the s	street address of the business office of its r	egistered agent,
Such change was authorized by th	as authorized by resolution duly ad he board, or the corporation has be	lopted by its board of directors or by an of en notified in writing of the change.	ficer so
$X_{\lambda}$	e & GOme	Jill Cilmi, Vice President	
Signatu	re of an officer or director	Printed or typed name and title	
l further agree i of my duties, an document is bei corporation has	to comply with the provisions of al	ent and agree to act in this capacity. Il statutes relative to the proper and compl te obligation of my position as registered a e in the registered office address, I hereby ange.	lete performance igent. Or, if this confirm that the
By: ()	in les	03/21/2022	
	nature of Registered Agent	Date	
If signing on be	half of an entity:		
	, Asst. Vice President		
٠.	Abor or comment of the control		

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

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