

A03000000755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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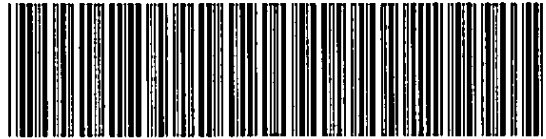
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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MAY 23 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Magellan Aircraft Services LLLP
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A03000000755

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Amanda Dunn
Contact Person
Magellan Aviation Group
Firm/Company
2345 Township Road, Ste B
Address
Charlotte NC 28273
City, State and Zip Code
Amanda.Dunn@magellangroup.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amanda Dunn at (704) 504 9204 (x7103)
Name of Contact Person Area Code and Daytime Telephone Number

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

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Magellan Aircraft Services LLLP
Name of Limited Partnership or Limited Liability Limited Partnership
2. 05/12/2003 3. A03000000755
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Manfre, Linda
Name
6530 West Rogers Circle, Ste 33
Address
Boca Raton, FL 33487
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Elizabeth Meehan
Name
1901 Green Road, Ste F.
Florida street address (P.O. Box not acceptable)
Deerfield Beach FL 33064
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

[Signature]
Signature of General Partner

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 obligations of my position as registered agent.

[Signature]
Signature of Registered Agent

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

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2008 FEB 21 PM 4:29
STATE OF FLORIDA
TALLAHASSEE, FLORIDA
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