## PODDDDDS339 LAW OFFICES BERNSTEIN & BERGER, P.A. SUITE 2608 NEW WORLD TOWER 100 NORTH BISCAYNE BOULEVARD MIAMI, FLORIDA 33132

Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other  OTHER FILINGS  Annual Report Fictitious Name	ROA Chord	RE	Change of Regin Dissolution/Winderger  GISTRATION/ Foreign Limited Partner Reinstatement	stered thdra	wal		
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CR2E031(7/97)

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

	provisions of sections 607.050 corporation organized under the			8, Florida Statutes	5,		
_	owing statement in order to cha	•		d agent or both i	_		
the State of Flor		ige us registered offi	ce or registered	a egent, or both, t	•		
		QUANTEM AVIATION SERVICES, INC.					
2. The mailing a	ddress of the corporation :	38 Perimeter Ro	oad				
		Londonderry, NF	I 03053				
3. Date of incor	poration/qualification: 9/25/0	Docum	ment number:_	F00000005339			
4. The name and	address of the current registere	d agent and office:					
<u></u>	CT Corporation System			TAS: 0			
_	CT Corporation System  1200 South Pine Island  Plantation, FL 33324  address of the new registered a  (P. O. Box  Jeffrey A. Bernstein,	l Road		L AL	e		
_	Plantation, FL 3332	4		AS Y	4		
5. The name and	address of the new registered a	gent (if changed) and/	or registered of	fice (if changed):	1		
	(P. O. Box	: Not Acceptable)		파우 를			
	Jeffrey A. Bernstein,	Esq.		207 71.S 7.0			
_	100 N. Biscayne Blvd.			ATE ATE			
, 	Miami, FL 33132		-				
The street addrea	ss of its registered office and th d, will be identical.	e street address of the	e business offic	e of its registered			
Such change wa	s authorized by resolution duly board.	adopted by its board	of directors or	by an officer so			
			جاء				
(Signature o	f an officer, chairman or vice chairman of	the board)	(Dai	te)			
Salvata	(Printed or typed name and title)	(sesident					
Havino heen nar	ned as registered agent and to creby accept the appointment a comply with the provisions of ny duties, and I am familiar wi	accent service of pro-	cess for the abo d agree to act i o the proper ar igation of my p	ove stated in this capacity. nd complete osition as			
1/1/	Se to		8/3/2.	٠			
(Si)	gnature of Registered Agent)		(Date)				
f signing on behalf		,					
(T)	yped or Printed Name)		(Capacity)	<del>.</del>			

CR2E045(9/00)

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