F05000 007 225

(Ře	equestor's Name)		
(Āc	ddress)		
(Ac	ddress)		
(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	usiness Entity Nar	ne)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



900333120359

De Deklusse, . . 400011 . • •a1.

FILEU
19 SEP -9 M 7: 10

S. YOUNG

S. YOUNG



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: September 5, 2019

Order#: 905708-005

Re: BBA AVIATION USA, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of ch	ange is submitted for a corporat	2, 617.0502, 607,1508, or 617.1508, Florida Statuti tion organized under the laws of the State of Delay tor registered agent, or both, in the State of Florida	ware
	the corporation: BBA AVIATION	·	a.
		Avenue, Suite 1205, Orlando, FL 32801	
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 12/13/20	Document number: F05000007225	5
5. The name and		gistered agent and registered office on file with the	
	C T Corporation System		19
	1200 South Pine Island Road	2	3 SEP
	Plantation	FL 33324	9
6. The name and (if changed):	street address of the new registe	tered agent (if changed) and /or registered office	AT T: 10
	Corporation Service Company		\$:: o
	1201 Hays Street		
		Box NOT acceptable	
	Tallahassee	FL 32301	
The street address changed will	ss of its registered office and th be identical.	ne street address of the business office of its regist	ered agent,
Such change was authorized by the	s authorized by resolution duly e board, or the corporation has l	adopted by its board of directors or by an officer been notified in writing of the change.	so
-Xiee	2 Comi	Jill Cilmi, Vice President	
/ } "	of an officer in director	Printed or typed name and title	
r juriner agree it performance of n agent. Or, if this hereby confirm t		igent and agree to act in this capacity. I all statutes relative to the proper and complete th and accept the obligation of my position as reg y to reflect a change in the registered office addre otified in writing of this change.	istered vss. I
By:	umker	09/05/2019	
Signa	nture of Registered Agent	Date	
If signing on beh	alf of an entity:		
Ami M. Casper,	Asst. Vice President		
Тур	ed or Printed Name	=	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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