Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)222-1092 Fax Number : (850)878-5368

REGISTERED AGENT CHANGE

PAN AM INTERNATIONAL FLIGHT ACADEMY, INC.

Certificate of Status	0
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR RECISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607,0502, 617,0502, 607,1508, or 617,1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Pan Am International Hight Academy, Inc.	
2. The principal office address: 5000 NW 36th Street, Miami, Florida 33122	
3. The mailing address (if different): P.O. Box 660920, Miami, Florida 33266-0920	
4. Date of incorporation/qualification: 06/29/2006 Document number: F06000004451	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Yito A Cutrone	
5000 NW 36th St \(\overline{\pi} \)	
Miami, FL 33122	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	-
CT Corporation System	
CT Corporation System c/o CT Corporation System, 1200 South Pine Island Road	
(P.O. Hox NOT acceptable)	
Plantation, Florida 33324	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	
Vito Cutrone	
(Printed or typed name and fills)	
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 camplete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. I hereby confirm that the corporation has been notified in writing of this change.	
By: Carlaia a Curre 6-24-09	
(Signuture of Registered Agent) (Outo)	
If signing on behalf of an entity: Berbara A. Burke Special Assistant Secretary	
(Typed or Printed Name)	
* * * FILING FEE; \$35.00 * * *	
MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSES, FL 32314 CR2E045 (8/US)	

FLOOR - (NV) 4/2005 C T System Online