F06000005943

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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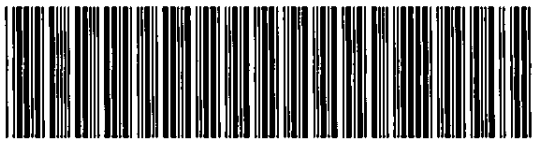

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CORPORATE ACCESS, INC.

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WALK IN

PICK UP: 5/21/07

- ☐ CERTIFIED COPY
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- ☑ FILING — Change of Registered Agent

1. Safeair Agency, Inc.
(CORPORATE NAME AND DOCUMENT #)
2. (CORPORATE NAME AND DOCUMENT #)
3. (CORPORATE NAME AND DOCUMENT #)
4. (CORPORATE NAME AND DOCUMENT #)
5. (CORPORATE NAME AND DOCUMENT #)
6. (CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED 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 Georgia *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: SAFEAIR AGENCY, INC.

2. The principal office address: 500 Plantation Park Drive, Loganville, GA 30052

3. The mailing address (if different): P.O.Box 3529, Loganville, GA 30052

4. Date of incorporation/qualification: 09/14/2006 Document number: F06000005943

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Paracorp Incorporated
236 East 6th Avenue (P.O. Box NOT acceptable)
Tallahassee, FL 32303

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.

(Signature of an officer or director) (Printed or typed name and title)

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 obligation of my position as registered agent. I understand 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.

(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

(Typed or Printed Name)

*** FILING FEE: $35.00 ***

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FLORIDA 32314

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