K38520

(Re	questor's Name)	-
(Ad	dress)	
140	idress)	
(/ 10	are 33)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
_	_	_
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	Certificates	of Status
	_	
Special Instructions to	Filing Officer:	
	-	

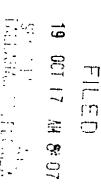




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COVER LETTER

SUBJECT:_	_APAIR Inc. Name of Corporation
OOCUMEN	T NUMBER: K38520
The enclosed	Statement of Change of Registered Office/Agent and fee are submitted for filing
Please return	all correspondence concerning this matter to the following:
	W. Cody Estes Sr.
	Name of Contact Person
	Firm/Company
	3705 20th Street
	Address
	Vero Beach FL 32960
	City/State and Zip Code
	Cody@estescitrus.com
	E-mail address: (to be used for future annual report notification)
For further in	formation concerning this matter, please call:
144	ly Estes Sr. at (772)4739251 Name of Contact Person Area Code & Daytime Telephone

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

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

- 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 Florida	
in order to change its registered office or registered agent, or both, in the State of Florida.	_
1. The name of the corporation: LAPAIR Inc.	
2. The principal office address: 3705 20th Street Vero Beach FL 32960	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10/13/1988 Document number: K38520	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
Charles R, Chilton	
2503 Partridge Dr.	
Winter Haven FL 33884	-71
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	FILED
W. Cody Estes Sr.	اسا
3705 20th Street	
P.O. Box NOT acceptable Vero Beach FL 32960	
vero beach FL 32900	
The street address of its registered office and the street address of the business office of its registered ag as changed will be identical.	ent,
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.	
W Cody Estes Sr/President 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. 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.	
10/11/2019	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
W Cody Estes Sr. Typed or Printed Name	

Make Checks Payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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