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K. SALY MAY 22 2018

COVER LETTER

TO:	O: Registration Section Division of Corporations				
SUBJI	MAGELLAN GROUP LLC				
		of Limited Liability Company			
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:					
Amar	nda Dunn				
	Name of Person				
Mage	ellan Aviation Group				
	Firm/Company				
2345	Township Road, Ste B				
	Address				
Charl	lotte NC 28273				
	City/State and Zip Code				
	nda.Dunn@magellangroup.net				
Ē	-mail address: (to be used for future annua	report notification)			
For fur	ther information concerning this matter, please	ease call:			
Amar	nda Dunn	704 504 9204 (x7103)			
	Name of Person	Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
	Enclosed is a check for the following amount:				
	□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida

Name of the limited liability company: Magellan Group LLC				
2. (a)	Magellan Group LLC	(b) Magell	lan Group LLC	
-· (u) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	1901 Green Road, Ste F	2345 T	ownship Road, Ste B	
	Deerfield Beach, FL 33064	Charlo	tte NC 28273	
	10/24/2001	L01000	018473	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Linda Manfre			
	Registered Agent and Registered Office shown on the records of the		ate:	
·	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)		
	6530 West Rogers Circle, Ste 33,		_ <u> </u>	
	Boca Raton FL	33487	_ 三	
(b)	Elizabeth Meehan Enter name of NEW Registered Agent and/or NEW Registered 6	Office address:	A 21 PH 3 16	
	NEW Registered Office Address:			
	1901 Green Road, Ste F		_	
	Deerfield Beach	33064	_	
the charagent was/we the artice Skinan I Hereb provision to mere notified	mited liability company is not organized under the law nge or changes are made, the Florida street address of a ill be identical. Or, in the case of a Florida limited lia reauthorized by an affirmative vote of the members of mes of organization or the operating agreement of the law use of a member or authorized representative of a member by accept the appointment as registered agent and agreems of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address. In in writing of this change.	the registered officiently company, it fitted limited liabil limited liabil limited liabil limited liabil limited liability contains the second liability company is second liability company.	is hereby confirmed that the change(s) ity company or as otherwise provided in impany. Printed or typed name of signee pacity. I further agree to comply with the syduties and Lam familiar with and accept	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00