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(Re	questor's Name)		
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

N. Oulligan SEP 25 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT. Van Fleet International Airport Development Group, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John W. Reed

Name of Person

Van Fleet International Airport Development Group, LLC

Firm/Company

4905 34th Street South, # 366

Address

St. Petersburg, Florida 33711

City/State and Zip Code

JWREED1976@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John W. Reed

 $_{\rm at}$ (21)

623-3544

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

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

Pursua liahilit	nt to the provisions of sections 608.416 or 608.5 v company submits the following statement in orde	08, Florida Statutes, the s er to change its registered	undersigi office or	ned li regi:	mited stered
agent, or both, in the State of Florida.			Sylve S		
1 Name of the limited lightlity gammany, Van Flort International Almost Development Crown 11 C				2013	
1. Name of the limited liability company: Van Fleet International Airport Development Group, LLC		Airport Development Gloup, ELC	20 12 12 1 20 12 12 1	SEP	
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)		7: 4905 34th Street South # 366		~	<u> </u>
		St. Petersburg	237	-2	
		Florida 33711			111
		•	50	E	O
(b) Mailing address of limited liability company:	Mailing address of limited liability company:	4905 34th Street South # 366	OR OR	ယူ	
(Note: MAY BE POST OFFICE BOX)		St. Petersburg	70	90	
		Florida 33711		9	
01/16/03		L03000001866			
	e of filing/registration in Florida	4. Document number			
S. Dau	e of thing/registration in Florida	4. Document number		•	
5. (a)	Registered Agent and Registered Office shown on	the records of the Florida D	ept. of S	tate:	
Registered Agent:		Reed, John W.			
	B		· · · · · · · · · · · · · · · · · · ·		
	Registered Office Address:	103 South Ninth Avenue			
	_	Wauchula			
		Florida 33873			<u></u>
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV NEW Registered Agent</u> :	John W. Reed	ess:		
	ADDITION OF A LI				
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		4905 34th Street South # 366			
		St. Petersburg Florida 33711	.FL		
		FORMA 337 TI	,F L		
confirm and the liability the me	mited liability company is not organized under the lend that after the change or changes are made, the F business office of the registered agent will be idently company, it is hereby confirmed that the change(s) mbers of the limited liability company or as otherwinating agreement of the limited liability company.	orida street address of the lical. Or, in the case of a Fl was/were authorized by an	registered orida lim Laffirmat	l offici ited ive v	ote of
Signature	of a member or authorized representative of a member				
	t and the second				
	ohy w Reed	_			
	or typed name of signee				
I herely comply and I a Chapte address	by accept the appointment as registered agent and a with the provisions of all statutes relative to the pro m familiar with and accept the obligations of my po r 608, F.S. Or, if this document is being filed to me s, I hereby confirm that the limited liability company	gree to act in this capacity. per and complete perform sition as registered agent a rely reflect a change in the has been notified in writi	I furthe ance of n is provide registere ig of this	r agra ny dul ed for ed offi chan	ze to lies, lin lice ge.
Sight	of Registered Agent				
Signature	or registered Agent				

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