LC3000005056

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COVER LETTER

TO:

INHS18 (2/14)

TO:	Registration Section Division of Corporations						
SUBJ	SHELTAIR AVIATION LGA, LL	С					
ODG	Name of Limited Liability Company						
Dear S	Sir or Madam:						
The er	nclosed Registered Agent/Registered O	ffice Change and fo	ee(s) are submitted for filing.				
Please	return all correspondence concerning t	his matter to the fo	ollowing:				
Damas	o W. Saavedra						
	Name of Person		_				
Saaveo	Ira-Goodwin						
	Firm/Company		_				
888 S.	E 3rd Avenue, Suite 500						
	Address	, <u> </u>					
Fort La	niderdale, Florida 33316						
	City/State and Zip Code		_				
dpazo(@saavlaw.com						
I	E-mail address: (to be used for future ar	inual report notific	ation)				
For fu	rther information concerning this matte	r, please call:					
Deann	a Pazo	954 at (767-6333				
	Name of Person	(Area Code & Daytime Telephone Number				
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the following	ig amount:					
■ \$25 Filing Fee		□ \$55	5 Filing Fee & Certified Copy				

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.

1.	Na	me of the limited liability company: SHELTAIR AVIA	TION	N [(GA, LLC	
2. (а)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 4860 NE 12TH AVE.	_	(b		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 12TH AVE.
		FORT LAUDERDALE, FL 33334	_			AUDERDALE, FL 33334
		02/10/2003			L0300000	5058
 3. 5. ((a)	Date of filing/registration in Florida Saavedra, Damaso W. Esq.	4.			Document number
	,	Registered Agent and Registered Office shown on the records of t	he Flo	orida	Dept. of Si	221 AUG 23
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 312 S.E. 17th Street Second Floor				
		Fort Lauderdale , FL	33310	6		- - - - PH -: 0
()	b)	Enter name of NEW Registered Agent and/or NEW Registered Saavedra, Damaso W, Esq. NEW Registered Office Address: 888 S.E 3rd Avenue, Suite 500	Office	e ad	dress:	
		Fort Lauderdale , FL	33310	6		
char ager was, the to Signal I he prov the com notin	nge fwe fiti gnat risio pobli	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia tre authorized by an affirmative vote of the members of cless of organization or the operating agreement of the area of a member or authorized representative of a member of the appointment as registered agent and agreement of a member of all fractions of a member of the proper and complete its acceptance of the provided agent as provided in the registered agent as provided in the registered office address. In the registered of this change.	rs of regis bility f the limite	the tere co lim ed l	ed office a mpany, it ited liability co	and the business office of the registered is hereby confirmed that the change(s) lity company or as otherwise provided in ompany. A M. HOLLAND Printed or typed name of signee Apacity. I further agree to comply with the conductor and Law familiar with and accept