

LD4000031475

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

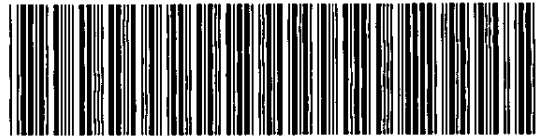
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500274419845

07/07/15--01010--019 \*\*25.00

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
15 JUL -7 PM 12: 01  
TO ACHIEVE USE  
SUFFICIENT OF FILING

FILED  
2015 JUL -7 AM 9: 20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Culligan JUL 8 2015

**CORPORATE  
ACCESS,  
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

**WALK IN**

PICK UP: 7/7 KATELYN

- CERTIFIED COPY \_\_\_\_\_
- PHOTOCOPY \_\_\_\_\_
- CUS \_\_\_\_\_
- FILING Ra Change \_\_\_\_\_

1. Miami Air, LLC LO4000031475  
(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:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Miami Air, 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:

Erika Easter

\_\_\_\_\_  
Name of Person

eResidentAgent, Inc.

\_\_\_\_\_  
Firm/Company

12121 Wilshire Boulevard, Suite 1201

\_\_\_\_\_  
Address

Los Angeles, CA 90025

\_\_\_\_\_  
City/State and Zip Code

filings@eminutes.com

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

For further information concerning this matter, please call:

Erika Easter

at ( 212 ) 772-7770

\_\_\_\_\_  
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**

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. Name of the limited liability company: Miami Air, LLC

2. (a) 141 Fifth Avenue, 2nd Floor  
Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*  
New York, NY 10010

(b) 141 Fifth Avenue, 2nd Floor  
Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*  
New York, NY 10010

3. 04/23/2004 Date of filing/registration in Florida

4. L04000031475 Document number

5. (a) Corpdirect Agents, Inc.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
515 East Park Avenue  
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
Tallahassee, FL 32301

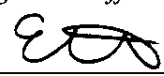
FILED  
2015 JUL -7 AM 9:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(b) eResidentAgent, Inc.  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
236 E 6th Ave.  
NEW Registered Office Address:  
Tallahassee, FL 32303

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

 Erika Easter  
Signature of a member or authorized representative of a member Printed or typed name of signee

*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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

  
Signature of Registered Agent