## L04000060401

| David E. Rarber (Requestor's Name)          |  |  |  |  |  |
|---|--|--|--|--|--|
| 7751 KIMSPOINTE                             |  |  |  |  |  |
| Partury No. 128 (Address)                   |  |  |  |  |  |
| OV/QMO FI 32819<br>(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



700059184647

09/07/05--01005--002 \*\*55.00

2005 SEP -6 PM 4: 56

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

Pursuant to the provisions of sections 608.416 or 608.508, 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.

| agent, or both, in the Sta   | ite of Florida.  |   |   |   |  |
|--|--|---|---|---|--|
| 1. The name of the limit   | ted liability company is:  | Sea & Air S   | ales, LLC.  |   |  |
| 2. The mailing address of  | of the limited liability co  | ompany is : <u>77</u>   | 51 Kingspointe  | Parkway, No. 128 _  |  |
| Orlando, FL 32819  |  |   |   |   |  |
| 08/13/2004   |  |   | L0400060401   |   |  |
| 3. Date of filing/registration in Florida  |  | 4.  | 4. Document number  |   |  |
| 5. The name of the regis<br>Florida Department of  |  | stered office add   | lress as shown o  | on the records of the   |  |
| -  | Agents and Corpor  | rations, Inc,   |   |   |  |
|  | DO DOV 544   | Name  |   | ·   |  |
|  | PO BOX 511   |   |   |   |  |
| Address  |  |   |   | 2 2   |  |
|  | Wilmington, DE 19  | 899-0511<br>, State and Zip   |   | ALL<br>ALL  |  |
|  | City,  | , State and Zip   |   | ≥ 第 页   |  |
| 6. The name and address  | of the new registered a  | gent and/or offi  | ce:   | ASSO -  |  |
|  | William J.Kitchen  |   |   | -6 PM<br>-6 PM<br>ASSEE, F  |  |
|  | 7751 Kingspointe PKWY, No. 128   |   |   | FILED 2005 SEP -6 PM 4: 56 2005 SEP -6 PM 4: 56 PALLAHASSEE, FLORIDA  |  |
|  | Florida street addres  | ss (P.O. Box NO   | T acceptable)   | DA S  |  |
|  | Orlando,   | FL 32819  |   |   |  |
|  | City, S  | State and Zip   |   |   |  |
| If the limited liability co-<br>confirmed that after the cand the business office of<br>liability company, it is he<br>the members of the limit<br>the operating agreement | change or changes are many of the registered agent was ereby confirmed that the ed liability company or of the limited liability company or the liability compa | nade, the Florida<br>rill be identical.<br>e change(s) was,<br>as otherwise pro-<br>company.    | a street address of Or. in the case   | lorida, it is hereby of the registered office of a Florida limited d by an affirmative vote of ticles of organization or                    |  |
| William J. Kitchen   |  |   |   |   |  |
| (Printed or typed name of signer   | <del>)</del>   |   |   |   |  |
| I hereby accept the appo<br>comply with the provisio<br>and I am familiar with a<br>Chapter 608, F.S. Or, if<br>address, I hereby confirm                                  | pintment as registered a<br>ns of all statutes relative<br>nd accept the obligation<br>this document is being<br>n that the limited liabili  | igent and agree<br>is of the proper<br>is of my position<br>filed to merely i<br>ty company has | to act in this ca<br>and complete pe<br>as registered a<br>reflect a change<br>been notified in | pacity. I further agree to<br>erformance of my duties,<br>ugent as provided for in<br>In the registered office<br>I writing of this change. |  |
| (Signature of Registered Agent)  |  | <del></del>   |   | •   |  |

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

INHS18(10/99)