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SECRETARY OF STATE
TALL AHASSEF, FLORID,

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: AVIATOR WAY PROPERTY (Name of	79 LLC Limited Liability Company)	**************************************	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for	filing.	
Please return all correspondence concerning the	nis matter to the following:		
ANNETTE H. JENNER. (Name of Person)			
(Firm/Company)			
(rim/company)			
3361 TESORO CIRCLE (Address)			
NEW SMYRNA BEACH, FL (City/State and Zip Code)	32168		
For further information concerning this matter	, please call:		
ANNETTE JENNER	at (386) 402-4470		
(Name of Person)	(Area Code & Daytime Telephone	Number)	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	2008 HAY SECRET	
Registration Section Division of Corporations	Registration Section Division of Corporations		
Clifton Building	P.O. Box 6327	ASS 19	ANSHORM
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314		m
Enclosed is a check for the following	amount:	3: 52 STATE LORIO	السيدة
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Con	T	

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. 1. Name of the limited liability company: AVIATOR WAY PROPERTY LLC 2. (a) Principal office address of limited liability company: 336/ TESORO CIRCLE NEW SMYRNA BEACH, (Note: MUST BE STREET ADDRESS) SAME AS ABOVE (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) L06000010314 JANUARY 24, 2006 3. Date of filing/registration in Florida Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: 10728 WOODCHASE CIRCLE Registered Office Address: (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**: **NEW** Registered Agent: 3361 TESORO CIRCLE **NEW** Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) NEW SMYRNABEACH ,FL 32168 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. (Signature of a member or authorized representative of a member) ANNETTE H, JENNER (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 duffes, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, 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)