207000067940

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
- (City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dasilless Elliky Name)
(Document Number)
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Elite Business Aircraft, LLC		
	ne of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning th	is matter to the following:	
Irit Vizer		
Name of Person		
Elite Business Aircraft, LLC		
Firm/Company		
111 S Maitland Ave.		
Address		
Maitland, FL 32751		
City/State and Zip Code		
teri@viaairholdings.com		
E-mail address: (to be used for future ann	nual report notification)	
For further information concerning this matter,	, please call:	
Irit Vizer	407 7949757	
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	g amount:	
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	

INHS18 (2/14)

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.

2. (a)		(b)	
s. (a)	Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	pany:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	111 S Maitland Ave.		S Maitland Ave.
	Maitland, FL 32751	Mail	tland, FL 32751
	06/28/2007	L070	00067940
3. :	Date of filing/registration in Florida Vizer, Irit	4.	Document number
5. (å)	Registered Agent and Registered Office shown on the re	ecords of the Florida Dept. o	of State:
	Registered Office Address (MUST BE FLORIDA S 218 Jackson Street	STREET ADDRESS)	19
	Maitland	FL_32751	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u>	egistered Office address:	MIL 15 PH 2: 94 ANAMS OF TUNIOS
	NEW Registered Office Address:		<u> </u>
	111 S. Maitland Ave.		
	Maitland	. FL 32751	
the cha agent v was/we the arti	imited liability company is not organized underinge or changes are made, the Florida street additional being a florida. Or, in the case of a Florida linear authorized by an affirmative vote of the mercles of organization or the operating agreement ture of a member or authorized representative of a member	dress of the registered mited liability company embers of the limited lint of the limited lint of the limited liability.	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in

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

Signature of Registered Agent