L07000113498

(Re	questor's Name)
(Add	dress)
(
(Adı	dress)
(City	y/State/Zip/Phone #)
(City	yourseless from #7
PICK-UP	WAIT MAIL
(Bu:	siness Entity Name)
(Do	cument Number)
Certified Copies	Certificates of Status
Special Instructions to Filin	g Officer:
	ORNE
	J. HUN'
	J. HORNE JUL -7 2023
	10r

Office Use Only



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SECRE (A)

2023 JUL -6 1/4 !

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CORPORATION SERVICE COMPANY 1201 Hays Street OPPPTBssee, FL 32301

Phone: 850-558-1500

	ACCOUNT NO.	: I2000000195			
	REFERENCE	: 854551 7561392			
	AUTHORIZATION	: Equalle is an			
	COST LIMIT	: \$ 25.00			
ORDER DATE :	July 5, 2023				
ORDER TIME :	1:39 PM				
ORDER NO. :	854551-001				
CUSTOMER NO:	7561392 .				
CHANGE OF AGENT					
NAME:	GK AVIATION,	LLC			
PLEASE RETURN	THE FOLLOWING AS	PROOF OF FILING:			

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

CERTIFIED COPY
XX PLAIN STAMPED COPY

EXAMINER:		

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. N	ame of the limited liability company: GK AVIATION	N. LLC			
))		
` '	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`		Mailing address of limi (Note: MAY BE PO	ited liability company:
	301 East Pine ST Suite 1400		301 East	Pine ST Suite 140	0
	ORLANDO, FL 32801		ORLAND	O, FL 32801	
	11/13/2007		L0700011	3998	
3.	Date of filing/registration in Florida	4.		Document number	ŗ
5. (a)					
J. (a)	Registered Agent and Registered Office shown on the records HAGGARD, GUY S	of the Florida	Dept. of State	 e:	
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS		-	
	301 East Pine ST Suite 1400		_		202 SE TAL
	ORLANDO	32801 FL_		_	2023 JUL SECRETA
					-6 -6
(b)	Enter name of NEW Registered Agent and/or NEW Register			-	
			<u></u> -		
	Corporation Service Company				
	NEW Registered Office Address:			-	ØD.
	1201 Hays Street			_	
	Tallahassee	FL_32301			
change agent v was/we the arti	imited liability company is not organized under the le or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members icles of organization or the operating agreement of the dam Mikkelson ture of a member or authorized representative of a member	laws of the he registere liability co s of the lim he limited l	ed office and mpany, it is ited liability	d the business offic s hereby confirmed y company or as ot ipany.	te of the registered that the change(s) herwise provided in
Lhere.	hy accept the appointment as registered agent and a	gree to act	in this capa	acity. I further agr	ee to comply with the
provisi the obl to mer	ions of all statutes relative to the proper and completigations of my position as registered agent as providely reflect a change in the registered office address. If a change in the registered office address.	le performe led for in C I hereby co	ince of my c hapter 605 infirm that t	duties, and I am far F.S. Or, if this do the limited liability	niliar with and accept ocument is being filed company has been
<u>J.</u> Signatu	MCa. C. KND. Cre of Registered Agent	Gra	ice E. Kirby	, Asst. Vice Presid	ent