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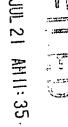
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SECRETARY OF STATE
TALLAHASSEE FLORIDA



## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJ		ne of Limited Liability Company)
Dear S	Sir or Madam:	
The en	nclosed Registered Agent/Regis	tered Office Change and fee(s) are submitted for filing.
Please	e return all correspondence conc	erning this matter to the following:
	Carlos M. Samlut, CPA (Name of Person)	<u> </u>
	Samlut & Company (Firm/Company)	<del></del>
	P.O. Box 557243 (Address)	
-	Coral Gables, FL 33255 (City/State and Zip Code	<del>e</del> )
For fi	urther information concerning th	is matter, please call:
	Carlos M. Samlut, CPA (Name of Person)	at ( <u>305</u> ) 461-9518  (Area Code & Daytime Telephone Number)
	STREET/COURIER ADDRES 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 f	ollowing amount:
	X \$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 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. The name of the limited liability company is:	Quick Aerospace Group, LLC
2. The mailing address of the limited liability company is:	5420 SW 55 Avenue .
	Davie, FL 33314
February 8, 2008  3. Date of filing/registration in Florida	L08000014572 4. Document number
5. The name of the registered agent and the registered office Florida Department of State:	address as shown on the records of the
Jorge Posada Name	
8810 Fountainebleau Address	Blvd, Suite 111
Miami, Florida 3317 City, State and Z	ip Fs. 8
6. The name and address of the new registered agent and/or	office:
Jorge Posada Name 5420 SW 55 Avenue	21 M
Florida street address (P.O. Box	NOT acceptable)
Davie, FL 3317 City, State and Zip	'2
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identic liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company.  (Signature of a member or authorized representative of a member)	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote
Jorge Posada (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the pro- and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.
(Signature of Registered Agent)	
Division of Corporations, P.O. Box 632	

**FILING FEE: \$25.00** 

INHS18 (8/05)