

L 08000079330

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

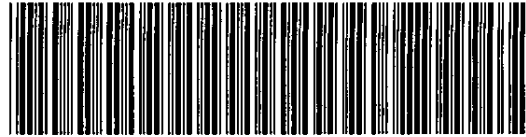
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

J. BRYAN

✓ OCT 12 2011

EXAMINER

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LA Chrem Aviation, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Adam Prida  
Name of Person

Newhouse Holdings, LLC  
Firm/Company

4002 West State Street, Suite 200  
Address

Tampa, FL 33609  
City/State and Zip Code

aprida@newhouseholdings.biz  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adam Prida at ( 813 ) \_\_\_\_\_  
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 amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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TALLAHASSEE, FLORIDA

*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.*

INHS18 (05/08)