## L09000002327

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

B. BOSTICK
JUN 29 2012
EXAMINER



ACCOUNT NO. : 12000000195

REFERENCE: 255473

7736440

EXAMINER:

AUTHORIZATION : C

COST LIMIT : \$ 25.00

ORDER DATE: June 26, 2012

ORDER TIME : 1:48 PM

ORDER NO. : 255473-054

CUSTOMER NO: 7736440

## CHANGE OF AGENT

NAME: MARCO ISLAND AVIATION III,

L.L.C.

PLEASE 1	RETURN I	CHE 1	FOLLOWING	AS	PROOF	OF	FILING:	<u>,                                    </u>	7 7	<u>ب</u> ن	
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CONTACT	PERSON:	: B	ecky Peiro	ce -	- EXT	29	919	≅iD <sub>A</sub>	<del>+</del> 1	!	

## 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.

in the state of 1 tortua.							
1. Name of the limited liability company: MARCO ISLA	AND AVIATION III, L.L.C.						
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	any: 848 Brickell Avenue, Suite 500, Miami FL 33131						
(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	848 Brickell Avenue, Suite 500, Miami FL 33131						
01/08/2009	L09000002327						
3. Date of filing/registration in Florida	4. Document number						
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Dept. of State:						
Registered Agent:	CT Corporation System						
Registered Office Address:	1200 S. Pine Island Road Plantation FL 33324						
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address:  (MUST BE FLORIDA STREET ADDRESS)	NEW Registered Office address:  Corporation Service Company  1201 Hays Street  Tallahassee  FL 32301						
If the limited liability company is not organized under that after the change or changes are made, the Florida st office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the article limited liability company.  Maure Cattlet	he laws of the State of Florida, it is hereby confirmed treet address of the registered office and the business are case of a Florida limited liability company it is						
(Signature of a member or authorized representative of a member)							
Maureen Cathell, Authorized Person (Printed or typed name of signee)	· <del></del>						
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my posit F.S. Or, if this document is being filed to merely reflect confirm that the limited liability company has been not	nd agree to act in this capacity. I further agree to proper and complete performance of my duties, and I ion as registered agent as provided for in Chapter 608, t a change in the registered office address, I hereby ified in writing of this change.						
By: Sauch Winght (Signature of Registered Agent) Corporation Service Company							
Division of Corporations, P.O. I	Box 6327, Tallahassee, FL 32314						

**FILING FEE: \$25.00**