L09000024280

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EXAMINER

GOVER LETTER

TO: Registration Section Division of Corporations		
	ng Air Spares, LLC	
Name of Limit	ted Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	ee Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:		
Dea D. Livingstone		
Don R. Livingstone Name of Person		
Name of Ferson		
Don R. Livingstone, Esq.		
Firm/Company		
8761 S.W. 133 Street, #202		
Address		
Miami, FL 33176		
City/State and Zip Code		
drlawyer@donrlivingstone.com		
drlawyer@donrlivingstone.com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Don R. Livingstone at	(305) 238-9473	
Name of Person	Area Code & Daytime Telephone Number	
CERCETICAURIER ARRESC	MAIL ING ADDRESS	
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301	,	
Enclosed is a check for the following amount:		
<u></u>		
∑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FQR 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.

Name of the limited liability company:	Lightning Air Spares, LLC
2. (a) Principal office address of limited liability c	ompany: Lightning Air Spares, LLC
(Note: MUST BE STREET ADDRESS)	7579 NW 50 Street Miami, FL 33166
(b) Mailing address of limited liability company	Lightning Air Spares, LLC
(Note: MAY BE POST OFFICE BOX)	7579 NW 50 Street Miami, FL 33166
03/11/2009	L09000024280
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sho	own on the records of the Florida Dept. of State:
Registered Agent:	Kevin B. Ward
Registered Office Address:	Lightning Air Spares, LLC 347 W 16 Street Hialeah, FL 33013
(b) Enter name of NEW Registered Agent and	or NEW Registered Office address:
NEW Registered Agent:	S.E. 2
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRES)	Lightning Air Spares, LLC 7579 NW 50 Street 7579 NW 50 Street 7579 NW 50 Street 75133166
If the limited liability company is not organized unconfirmed that after the change or changes are made and the business office of the registered agent will be liability company, it is hereby confirmed that the choof the members of the limited liability company or a or the operating agreement of the limited liability company or the operating agreement of the limited liability company or a signature of a member or authorized representative of a member	e, the Florida street address of the registered office
Kevin B. Ward	•
Printed or typed name of signee	
I hereby accept the appointment as registered agen comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being file address, I hereby confirm that the limited liability of	nt and agree to act in this capacity. I further agree to the proper and complete performance of my duties, I my position as registered agent as provided for in d to merely reflect a change in the registered office ompany has been notified in writing of this change.
Signature of Registered Agent	-

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