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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Auna Aeromatics Un 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:				
Melissa Diciz Name of Person				
Quin Peronautics IIc				
1419 Gulf Stream Circle Apt #101	AL AHE	3612 NOV		
Brandon Fl 33511 City/State and Zip Code	53EE 7E9	- - - - - - - - - - - - - - - - - - -		
E-mail address: (to be used for future annual report notification)	高層	: 27		
For further information concerning this matter, please call:				
Helissa Diaz at (813) 455 - 7005 Name of Person Area Code & Daytime Telephone No.	umber			
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:				

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

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.

3 , , ,	
1. Name of the limited liability company: Quin	Aeronautics U.C.
2. (a) Principal office address of limited liability compar (<i>Note: MUST BE STREET ADDRESS</i>)	y: 1419 Gulf Streom Circle AD+101 Brandon 1F1 83511
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1419 Gulf Stream Circle ADLIOI Brandon, Fl 33511
1/6/12	408600000
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:	Alfredo QuintopesEJR.
Registered Office Address:	1419 Gulf Stream Circle
	Brandon Pl 33511 = 5
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	Melissa Dige
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1419 Gulf Stream Circle AP+101 Brandon ,FL 33511
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be ider liability company, it is hereby confirmed that the change (the members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of a member of authorized representative of a member	Florida street address of the registered office atical. Or, in the case of a Florida limited by was/were authorized by an affirmative vote of
Printed or typed name of signee	<u> </u>
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to m address, I hereby confirm that the limited liability company.	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office ny 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