11200006009

(Requestor's Name)								
(Address)								
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PICK-UP WAIT MAIL								
(Business Entity Name)								
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2019 DEC 12 AH 10: 34

DEC 13 2019 M. SCLOMON CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195								
REFERENCE : 098812 8108485								
AUTHORIZATION: Spelle Men								
COST LIMIT : \$ 25.00								
ORDER DATE : December 12, 2019								
ORDER TIME : 10:27 AM								
ORDER NO. : 098812-005								
ORDER NO. : 098812-005								
CUSTOMER NO: 8108485								
CHANGE OF AGENT								
NAME: AIRN LLC								
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:								
CERTIFIED COPY XX PLAIN STAMPED COPY								
CONTACT PERSON: Amanda Robinson EXT# 62968								

EXAMINER:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. 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.	Na	me of the limited liability company: AIRN LLC						
2.	(a)		(b))				
	·· /	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		failing address of limited (Note: MAY BE POST	l liability co	ompany:	
		9198 NW 8th Ave.	_	1515 NW	167th St., Ste 341			
		Miami, FL 33150	_	Miami Ga	rdens, FL 33169			
		5/3/2012		L1200006	0091			
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)							
		Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of State	:			
		Robert Niznik	DDBECC					
		Registered Office Address (MUST BE FLORIDA STREET A	<i>DUKESS</i>	L			(,)	
		9198 NW 8th Ave					2819	
		Miami , FL	33150				DEC.	
							N3	
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered	Office add	dress:	-	7 (A) 11 (A) 12 (A) 12 (A) 13 (A)	734 IX	[]
						÷ (,	ë	1
		1201 Hays Street			-	= :	ဋ	
		NEW Registered Office Address:						
				- <u></u> ,	-			
		Tallahassee , FL	_ 32301		-			
th ag	e cha gent a as/w	imited liability company is not organized under the lavange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lierc authorized by an affirmative vote of the members of icles of organization of the operating agreement of the	the reginability confithe limited l	stered office ompany, it is nited liabilit	e and the business of s hereby confirmed t y company or as othe	fice of th hat the c	ie regis hange(:	stered s)
_	Signa	stage of a member of authorized representative of a member	1100	- CITTALLIN	Printed or typed name of	of signee	-	
th to	ovis e oh mer	by accept the appointment as registered agent and agi ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d'in writing of this elyinge	ee to act perform d for in (hereby co	t in this cap ance of my Chapter 603 onfirm that	acity. I fwither agre duties, and I am fam 5, F.S. Or, if this doc the limited liability o	e to compiliar with cument is company	ply with and a being has be	h the eccept filed en
5	ignati	re of Registered Agent Corporation Service Company	BY:		anda Robinson , Vice President			

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