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OCT 2 5 2013

T. H. S. STOY

COVER LETTER

TO: Registration Section
Division of Corporations

_{SUBJECT:} Heli Aviation Florida, 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:

Niclas Herle

Name of Person

Heli Aviation Florida, LLC

Firm/Company

8191 North Tamiami Trail, Hangar B-1

Address

Sarasota, FL 34243

City/State and Zip Code

info@heliaviation-florida.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Niclas Herle

...941

355-1525

Name of Person

Area Code & Davtime 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

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

liab	ilii	ant to the provisions of sections 608.416 or 608.5 ty company submits the following statement in orde or both, in the State of Florida.	08, Florida Statutes, the rochange its register.	e under ed offici	rsigned e or re	limitea gisterea
1. 1	Naı	me of the limited liability company: Hell Aviation Florida. LL	С			
2. ((a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y: 8191 N. Tamiamı Trail, Hangar B-1 Sarasota, FL 34243			
((b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	8191 N. Tamiami Trail, Hangar B-1 Sarasota, FL 34243			
05/10)/20°	12	L12000063266			
3. I	Dat	te of filing/registration in Florida	4. Document number			
5.	(a)	Registered Agent and Registered Office shown on t	he records of the Florida	a Dept. o	of State	e:
		Registered Agent:	Margaret Shoaf			
		Registered Office Address:	46 N. Washington Bivd. Suite 29 Sarasota, FL 34236	SEORE T	ZÓ 13 DOT	<u> </u>
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEY NEW Registered Agent</u> :	V Registered Office ad Niclas Herle	RY OF STATE	24 PM 1:28	ED
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	8191 North Tamiami Trail, Hangar I	3-1 55	60	
		MUST BE FLORIDA STREET ADDRESS	Sarasota		FL_34243	3
and liab the the	firi the ilit me ope	imited liability company is not organized under the lend that after the change or changes are made, the Fle business office of the registered agent will be identify company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise rating agreement of the limited liability company.	orida street address of the cal. Or, in the case of a was/were authorized by	ie regist Florida an affir	ered of Timited mative	fice d vote of
argu	uuy	on semember of authorized representative of a member				
Nicia: Print		rle or typed name of signee	-			
I he com and Cha add	ere ply 1 d pte res	by accept the appointment as registered agent and a with the provisions of all statutes relative to the proving a military with and accept the obligations of my power 608, F.S. Or, if this document is being filed to mean, I hereby confirm that the limited liability company	gree to act in this capac. Sper and complete perfo sition as registered agen rely reflect a change in to has been notified in wr	ity. I fut rmance it as pro he regis iting of	rther a of my a vided f tered o this cha	gree to luties, for in office ange.
Sign	atuı	Pregistered Agent				

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