L12000088357

(Requestor's Name)					
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					





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2016 JAN -6 AN 10: 50

COVERLETTER

TO:	Registration Section Division of Corporations				
SUBJF	AIRCRAFT GROUP LLC				
.,	Name of Limited Liability Company				
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Off	fice Change and f	ee(s) are submitted for filing.		
Please	return all correspondence concerning th	is matter to the f	ollowing:		
A may (0	- Cahmoltor		_ <u>1</u>		
Amye	e Schmelter Name of Person		mpun		
	Name of Person				
Prope	ellemead Aviation INC.				
	Firm/Company				
3086	21st ST NW				
	Address				
Winte	er Haven FL 33881				
	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	_		
amye	e@propellerheadaviation.com				
	E-mail address; (to be used for future and	nual report notifi	cation)		
For fur	rther information concerning this matter	, please call:			
Willia	nm E Boege Name of Person	888	777-7207		
	Name of Person	···········	Area Code & Daytime Telephone Number		
	STREET/COURIER ADDRESS:	MA	ILING ADDRESS:		
	Registration Section Registration S Division of Corporations Division of Co Clifton Building P.O. Box 6327		istration Section		
2661 Executive Center Circle			lahassee, Florida 32314		
	Tallahassee, Florida 32301				
	Enclosed is a check for the following	g amount:			
	□ \$25 Filing Fee	☑ \$5	5 Filing Fee & Certified Copy		

1NHS18 (2/14)

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.

I. Na	me of the limited liability company:	LLC		
2. (a)	118 Allamanda Drive	(b)	P.O. Bo	ox 2186
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Lakeland, FL		Bartow,	FL
	33803		33831	
	07/06/2012		L120000	88357
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Seoane, Sergio B			
(-,	Registered Agent and Registered Office shown on the records of the 118 Allamanda Drive	he Florida	Dept. of Stat	e:
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	Į	
				-
	Lakeland , FL	33803		
(b)	Propellerhead Aviation, INC.			20 20 3 3 3 3 3 3 3 3 3 3
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add	<u>lress</u> :	A A T
	3086 21st ST NW			- SS - M
	NEW Registered Office Address:			
			···	<u> </u>
				50 ∑
	Winter Haven , FL	33881		_
the cha agent v was/we the arti	imited liability company is not organized under the law inge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited line authorized by an affirmative vote of the members of dies of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and agreement of the light one of all proper and complete identions of all proper and complete in the proper and complete i	the regis ibility co f the lim limited l	stered offic ompany, it ited liabili iability.com	ex and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.
	by accept the appointment as registered agent and agrifons of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. It din writing of this change. The of Registered Agent	iereby c	onfirm that	the limited liability company has been