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| (Requestor's Name) | | |
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| (Address) | | |
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| (City/State/Zip/Phone #) | | |
| | | |
| (Business Entity Name) | | |
| (Document Number) | | |
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Jeanne L. Seewald

Direct Phone: 239.254.2905 Direct Fax: 239.254.2942 Email: jseewald@hahnlaw.com

December 27, 2017

Registration Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

Re: Shaw Aerox LLC

Dear Sir/Madam:

Enclosed for filing with respect to the above-referenced company is a Statement of Change of Registered Agent and our check in the amount of \$25.00 for the filing fee.

Please return all correspondence regarding this matter to the following:

Jeanne L. Seewald, Esq. Hahn Loeser & Parks, LLP 5811 Pelican Bay Boulevard, Suite 650 Naples, FL 34108

If you have any questions or require additional information, please call me at the number above.

Cordially yours,

HAHN LOESER & PARKS LLP

Jeanne L. Soculad

leanne L. Seewald

JLS/caf Enclosure 9842063 1

HAHN LOËSER & PARKS LLP attorneys at law

cleveland columbus naples fort myers san diego chicago 5811 Pelican Bay Boulevard. Suite 650 Naples, Florida 34108 phone 239.254.2900 fax 239.592.7716 hahnlaw.com

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.

| Principal office address of limited liability company: Mailir (<u>Note: MUST BE STREET ADDRESS</u>) June 11, 2013 L1300008419 | ng address of limited liability company: ote: MAYBE POST OFFICE BOX |
|---|---|
| (<u>Note: MUST BE STREET ADDRESS</u>) // <u>No</u> | ole: MAY BE PO <u>ST OFFICE BOX</u>) |
| | 90 |
| 3. Date of filing/registration in Florida 4. Doc | |
| | cument number |
| 5. (a) Giuseppe Carvelli | |
| Registered Agent and Registered Office shown on the records of the Florida Dept of State: | 17 |
| Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | E E |
| 25190 Bernwood Drive | DEC 2 |
| Bonita Springs | |
| (b)HL Statutory Agent, Inc. | EC 28 PH 24 49 |
| Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : | |
| NEW Registered Office Address: | |
| 5811 Pelican Bay Blvd., Suite 650 | |
| Naples, FL_34108 | |
| If the limited liability company is not organized under the laws of the State of Florida, the change or changes are made, the Florida street address of the registered office and agent will be identical. Or, in the case of a Florida limited liability company, it is here was/were authorized by an affirmative vote of the members of the limited liability com the articles of organization or the operating agreement of the limited liability company | I the business office of the registered by confirmed that the change(s) mpany or as otherwise provided in |
| Take A. h. L. 12-20.17 Lane Morlock | |
| Signature of a member or authorized representative of a member Print | ted or typed name of signee |

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. F.S. Or, if this document is being filed to merely reflect a changelin the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Pann ure of Registered Age Sigi

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