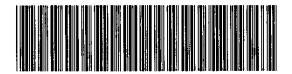
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(Requestor's Name)							
(Address)							
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(City/State/Zip/Phone #)	_						
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations			
SUBJI	ECT: INDIAN RIVER BY AIR LLC	;		
	Nan	ne of Limited Lia	bility Company	
Dear S	ir or Madam:			
The en	closed Registered Agent/Registered Off	ice Change and fo	ee(s) are submitted for filing.	
Please	return all correspondence concerning th	is matter to the fo	ollowing:	
KIMB	ERLY E. MASSUNG			
	Name of Person	······································	_	
INDIA	AN RIVER BY AIR LLC			
	Firm/Company		_	
1109	FAIRFIELD LANE		_	
	Address			
SEBA	ASTIAN, FL 32958-5965			
	City/State and Zip Code		-	
KMA	SSUNG@BELLSOUTH.NET			
E	-mail address: (to be used for future ann	nual report notific	ation)	
For fur	ther information concerning this matter,	, please call:		
KIMB	ERLY E. MASSUNG	772	589-5261	
	Name of Person		Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS:	MA	ILING ADDRESS:	
		istration Section		
			sion of Corporations	
e e e e e e e e e e e e e e e e e e e			. Box 6327	
	2661 Executive Center Circle Tallahassee, Florida 32301	Talla	ahassee, 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

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.

l. Na	me of the limited liability company: INDIAN RIVE	R BY AIR	LLC			
		(b)				
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	~	s of limited liability company: (BE POST OFFICE BOX)		
	1109 FAIRFIELD LANE	1.	1109 FAIRFIELD LANE			
	SEBASTIAN,FL 32958-5965	SEBASTIAN, FL 32958-5965				
	11/04/2013	L1:	3000156115			
3.	Date of filing/registration in Florida	4.	Document r	number		
5. (a)						
. (4)	Registered Agent and Registered Office shown on the records of	the Florida Dep	ot, of State:			
	JOHN JEROME MASSUNG					
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)				
	1109 FAIRFIELD LANE					
	SEBASTIAN	32958-59	65			
	, FL	·	· · · · ·			
(b)				<u>~1</u>		
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office address	<u> </u>	Fig. 3		
	WINDERLY E. MACCUNO			JUL 3		
	KIMBERLY E. MASSUNG			$S_{S_{i}}^{A} = \omega$		
	NEW Registered Office Address:					
	1109 FAIRFIELD LANE					
	SEBASTIAN	32958-59	65	7. 50 ORIGA		
he chaigent was/we he art Signa I here provise he objoorner	imited liability company is not organized under the laying or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited likere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the member of a member or authorized representative of a member by accept the appointment as registered agent and agricultures 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 do in writing of this change.	the registere ability composite limited liability KIMBE	ed office and the bus any, it is hereby con I liability company of ility company. ERLY E. MASSU Printed or typ	siness office of the registered firmed that the change(s) or as otherwise provided in NG oed name of signee there agree to comply with the		