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SECRETARY OF STATE

APPROVED

C. LEWIS

MAR 2 6 2014

EXAMINER

COVER LETTER *

	sion of Corporations		
SUBJECT:	TRUEAERO GROUP, LLC		
ochici.	Name o	f Limited Liability Company	
Dear Sir or N	Madam:		
The enclosed	d Registered Agent/Registered Office	Change and fee(s) are submitted for filir	ıg.
Please return	all correspondence concerning this i	natter to the following:	
Jennifer D	. Peshke, Esq.		
	Name of Person		
Law Office	es of Jennifer D. Peshke, P.A.		
	Firm/Company		
4733 N. H	ighway A1A, Suite 303		
	Address	<u>-</u> _	
Vero Bead	ch, Florida 32963		
	City/State and Zip Code		
jdp@pesh	kelaw.com		
E-mail	address: (to be used for future annua	report notification)	
For further in	nformation concerning this matter, pl	ase call:	
Laura Wild	1	772 231-1233	
	Name of Person	Area Code & Daytime Tel	ephone Number
Regi Divi: Clift 2661 Talla	stration Section sion of Corporations on Building Executive Center Circle ahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
	losed is a check for the following ar	ount:	
☑ \$2	25 Filing Fee	\$55 Filing Fee & Certified Co	ру

INHS18 (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.

1.	Na	me of the limited liability company: TRUEAERO G	RO	U	P, LLC				
2	(a)	6020 99th Street		a	6020 9	9th Street			
۷.	(α)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	-	(·)	Mailing address of limited lin		-	
		Sebastian, Florida 32958	-		Sebasti	an, Florida 32958			_
		01/06/2014	•		L140000	002087			. -
3. 5	(a)	Date of filing/registration in Florida BRENT CORRIE	4.			Document number			
•	(Ψ)	Registered Agent and Registered Office shown on the records of the 6020 99TH STREET Registered Office Address (MUST BE FLORIDA STREET AD					onade Troub on		
		SEBASTIAN , FL 3	29	58	}	- -	EUREI	14 MAR	<u>ַ</u>
	(b)	JENNIFER D. PESHKE, ESQ.					4551 4551	24	
	(0)	Enter name of NEW Registered Agent and/or NEW Registered Of 4733 N. HIGHWAY A1A, SUITE 303	ffice	e ac	ldress:	_	TO SIN		365
		NEW Registered Office Address:				_	Ę,r:	9	
		VERO BEACH , FL 3	29	63	}				
the age was the III prothe to no	cha ent was/we arti- signat herelovisie obli- mere tifie	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabilities authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited of a member or authorized representative of a member of a member of a member of all statutes relative to the proper and complete points of all statutes relative to the proper and complete points of my position as registered agent as provided all y reflect a change in the registered office address, I he is in writing of this change. Division of Corporations P.O. Bo	ne re ility the mite e to erfo for ereb	egi y c lin ed acorn in y c	istered office ompany, it inited liability con the month of the contract of the confirm that	ee and the business officis hereby confirmed that ty company or as otherwing and the second of the second of the second of the limited liability control of the limited liability control of the limited liability control of the second of the limited liability control of the second of the limited liability control of the	e of the rest the change vise providing signee 3/2000	gistere ge(s) led in	2014
	/	FILING FE				1350C, FL 34314			

INHS18 (2/14)