L14000095979

(Requestor's Name)				
(Add	ress)			
(, , , ,	+ ,			
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	■ WAIT	MAIL		
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J. HARRIE

COVER LETTER

`	gistration Section vision of Corporations			•
eras de zon	WINTER GARDEN AIR, LLC			
SUBJECT	Name of Limited Liability Company			
Dear Sir or	Madam:			
The enclose	ed Registered Agent/Registered Office	Change and	fce(s) are submitted for filing.	
Please retui	rn all correspondence concerning this t	natter to the	following:	
Destiny I	Baylor			
	Name of Person			
Paracorp	Incorporated			
	Firm/Company		_	
2804 Ga	teway Oaks Dr #100			
	Address			
Sacrame	ento, CA 95833			
	City/State and Zip Code			\
paracorp	@myparacorp.com			
E-ma	il address: (to be used for future annua	I report notif	ication)	
For further	information concerning this matter, pl	case call:		
Destiny E	Baylor	800	533-7272	1
	Name of Person		Area Code & Daytime Tele	phone Numbe
Re Di Cli 26	REET/COURIER ADDRESS: egistration Section vision of Corporations ifton Building 61 Executive Center Circle allahassee, Florida 32301	Re Di P.C	alLING ADDRESS: gistration Section vision of Corporations D. Box 6327 llahassee, Florida 32314	
En	nclosed is a check for the following a	mount:		
☑	\$25 Filing Fee	□ \$	55 Filing Fee & Certified Cop	y
HS18 (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.

rioria		ADDEN AID LLC
1. N	ame of the limited liability company:	SARDEN AIR, LLC
2. (a)	279 ZACHARY WADE ST.	(b) 279 ZACHARY WADE ST.
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	WINTER GARDEN, FL 34787	WINTER GARDEN, FL 34787
	06/13/2014	L14000095979
3.	Date of filing/registration in Florida	4. Document number
5. (a	B&C Corporate Servi	ces of Gentral Florid
(ti	Registered Agent and Registered Office shown on the records	
	Registered Office Address (MUST BE FLORIDA STREET	ET ADDRESS)
	390 North Orange Av	e. suite 1400
	oriando	FL 32901
		The state of the s
(b	Paracorp Incorporated Enter name of NEW Registered Agent and/or NEW Registered	ered Office address:
	155 Office Plaza Drive, 1st Floor	<u></u>
	NEW Registered Office Address:	, 6
		l l
	Tallahassee	FL32301
If the	limited liability company is not organized under the	laws of the State of Florida, it is hereby confirmed that after
agent	will be identical. Or, in the case of a Florida limiter	s of the registered office and the business office of the registered dliability company, it is hereby confirmed that the change(s)
was/the a	were authorized by an affirmative vote of the membe rticles of organization of the operating agreement of	ers of the limited liability company or as otherwise provided in the limited liability company.
	A. Juntin	Anthony_W_Justice
_	nature of a member or authorized representative of a member	Printed or typed name of signed
I her provi the o to me notifi	weby accept the appointment as registered agent and sions of all statutes relative to the proper and complebilizations of my position as registered agent as proverely reflect a change in the registered office address led in writing of this change.	agree to act in this capacity. I further agree to comply with the lete performance of my duties, and I am familiar with and accept vided for in Chapter 605, F.S. Or, if this document is being filed s, I hereby confirm that the limited liability company has been
٠,٠		Assistant Secretary

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

Signature of Registered Agent