

L14000-105791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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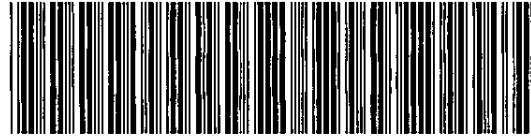
(Business Entity Name)

(Document Number)

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2015 JUN 23 PM 2:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Airborne Repairs, LLC.*

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June, 17, 2015

TO: Registration Section

Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

Good day, we respectfully request the registered agent for Airborne Repairs, LLC (L14000105791) be changed from; Corporation Service Company to Florida resident Anthony N. Guarcello.

In a meeting of the Board of Directors for Airborne Repairs, LLC on November 4, 2014 a decision was reached to discontinue association with Corporation service Company. (See attached Minutes)

Sincere Regards,

*Anthony Guarcello*

Anthony N. Guarcello

Airborne Repairs, LLC.

Secretary/Treasurer

## *Airborne Repairs, LLC.*

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November, 4, 2014

TO: Board Members Airborne Repairs, LLC

Sara Abdullah Khamas Al Sulaimani      President

Dilip Sanklecha                                  Vice President

Anthony N. Guarcello                          Secretary

Subject: Board Meeting

To confirm the decision from a meeting held on November 4, 2015 via Skype.

A unanimous decision of the Board of directors to discontinue the services of Corporation Services Company as register agent for Airborne Repairs, LLC.

The board further instructed the Secretary to contact the State of Florida and change the registered agent to Anthony N. Guarcello.

Sincere Regards,

*Anthony Guarcello*

Anthony N. Guarcello

Airborne Repairs, LLC.

Secretary/Treasurer

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Airborne Repairs, LLC  
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Anthony N. Guarcello  
(Name of Person)

Airborne Repairs, LLC  
(Firm/Company)

2400 S.W. 50th Street  
(Address)

Fort Lauderdale, FL 33312  
(City/State and Zip Code)

For further information concerning this matter, please call:

Anthony N. Guarcello at ( 786 ) 412-6711  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

