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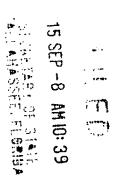
(Re	equestor's Name)	·····			
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COVER LETTER

TO: •.	Registration Section Division of Corporations		.d.,	* *	ψį	
SUBJ	JECT: EASY AERO LLC					
	Name of Limited Liability Company					
Dear :	Sir or Madam:					
The e	nclosed Registered Agent/Registered Offic	e Change and	fee(s) are sub	nitted for filing.		
Please	e return all correspondence concerning this	matter to the	following:			
AND	RES GUTIERREZ					
	Name of Person					
EAS	Y AERO LLC					
	Firm/Company					
1415	50 SW 129 TH STREET					
	Address					
MIAI	MI FL 33186					
	City/State and Zip Code					
AND	RES@EASYAERO.US					
	E-mail address: (to be used for future annu	al report notif	ication)			
For fu	urther information concerning this matter, p	olease call:				
AND	RES GUTIERREZ	305	972-491	9		
	Name of Person		Area Code &	Daytime Telephone Nu	ımber	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.o	AILING ADD gistration Sect vision of Corpo D. Box 6327 Ilahassee, Flor	on orations		
	Enclosed is a check for the following a	imount:				
	☑ \$25 Filing Fee	- \$	55 Filing Fee &	: Certified Copy		
INHS	18 (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: EASY AERO	LLC					
	(a)	EASY AERO LLC		(b)				
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		<u> </u>	Mailing address of limite (Note: MAY BE POS	d liability	compa	ny:
		5425 NW 161 STREET						
		MIAMI GARDENS , FL 33014	_					
		JUL 07 2015		L150001	17210			
3.		Date of filing/registration in Florida	4.	-	Document number	·		
5.	(a)	ANDRES GUTIERREZ						
	()	Registered Agent and Registered Office shown on the records of t ANDRES GUTIERREZ	he Flori	da Dept. of State	- e:			
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		-	.	 5		
		5425 NW 161 ST		<u>307</u>		>	5 SEP	•
		MIAMI GARDENS .FL	3301	4	-	> (1) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	-8	1 e-
					_	MS	<u> </u>	77
	(b)	Enter name of NEW Registered Agent and/or NEW Registered			_	T(_)	AM IO:	
		Enter name of NEW Registered Agent and/or NEW Registered	Office a	iddress:		30	39	
		NEW D LOW All	· · · · · · · · · · · · · · · · · · ·		-			
		NEW Registered Office Address:						
		14150 SW 129 ST	· · · · · · · · · · · · · · · · · · ·	- WALLET	_			
		MIAMI , FL	3318	6	_			
th ag wa	e cha gent v as/wa	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia the authorized by an affirmative vote of the members of cley of organization or the operating agreement of the	the regability of the li	gistered office company, it is mited liabilit	e and the business of s hereby confirmed to y company or as oth	ffice of that the	the reg	gistered e(s)
	1h	ihr khin!	A	ndres Gutie	errez			
	/ ~	ture of a member or authorized representative of a member			Printed or typed name	_		
pr the to no	hE re ovisi e obl mere otifie	by accept the appointment as registered agent and agr ods of all statutes relative to the proper and complete ieutions of my position as registered agent as provided If reflected change in the registered office address, I t if in writing by this change.	ee to a perfor d for ir hereby	ict in this cap mance of my i Chapter 605 confirm that	acity. I further agre duties, and I am fam 5, F.S. Or, if this do the limited liability	ee to con illiar wi cument compan	nply w ith and is beir iy has	vith the l accept ng filed been
Si	ignatu	Why H Mames 1						
/	/	Division of Corporations P.O. E			ssee, FL 32314			