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K. SALY DEC - 7 2017

COVER LETTER

	sion of Corporations		
SUBJECT:	Untamed Aero Solutions	·	
	Name	of Limited Lial	oility Company
Dear Sir or M	Madam:		
The enclosed	d Registered Agent/Registered Office	Change and fe	re(s) are submitted for filing.
Please return	all correspondence concerning this	matter to the fo	llowing:
Ryan Patri	ick Langlois		
	Name of Person		-
Untamed /	Aero Solutions		
	Firm/Company		•
6078 Walk	Along Way		
	Address		-
Crestview,	, FL 32536		
	City/State and Zip Code		•
ryan@unta	amedaerosolutions.com		
E-mail	address: (to be used for future annua	l report notific	ation)
For further is	nformation concerning this matter, pl	case call:	
Ryan Lang	glois	903	453-1225
	Name of Person		Area Code & Daytime Telephone Number
Regi Divi Clift 2661	EET/COURIER ADDRESS: istration Section sion of Corporations ton Building Executive Center Circle ahassee, Florida 32301	Regi Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, Florida 32314
Enci	losed is a check for the following an	mount:	
र्ज \$2	25 Filing Fee	□ \$55	Filing Fee & Certified Copy

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.

. Na	ame of the limited liability company: Untamed Ac	ero Solution	s, LLC
. (a)	6078 Walk Along Way		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(',	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Crestview, FL 32536	С	restview, FL 32536
	2-25-2016	L1	6000040099
•	Date of filing/registration in Florida	4.	Document number
. (a)	Ryan Langlois		
	Registered Agent and Registered Office shown on the records 327 Strawbridge Dr	of the Florida De	pt. of State:
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	
	Crestview, I	FL 32539	- CARE
(b)	Ryan Langlois		ASSEE TO THE PROPERTY OF THE P
. ,	Enter name of NEW Registered Agent and/or NEW Register	ed Office addres	FS 3
	6078 Walk Along Way		OF STATE
	NEW Registered Office Address:		
	Crestview	_{FL} 32536	
ne cha gent v as/wa ne arti	imited liability company is not organized under the large or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited cre authorized by an affirmative vote of the members cles of organization or the operating agreement of the pure of a member authorized representative of a member	of the register liability comp s of the limited he limited liab	ed office and the business office of the registered bany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in
rovisi he obl o merc	by accept the appointment as registered agent and a ins of all statutes relative to the proper and comple igations of my position as registered agent as provide ely reflect a change in the registered office address, d in writing of this change.	Te performanc	this capacity. I further agree to comply with the

Signature of Registered Agent