## 1100066458

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## COVER LETTER

<u>C</u> ,	on of Corporations	•	
SUBJECT: _	Inertia Helico	pters LLC.	
	Pante	To Emilied Liability Company	
Dear Sir or Ma	dam:		
The enclosed R	Registered Agent/Registered Offic	te Change and fee(s) are submitted for filing.	
Please return a	Il correspondence concerning this	matter to the following:	
Janes	Anthony Spannela Name of Person		
Inertia	Helicopters LLC. Firm/Company		2018 SEP
1970 C	hatsworth Way Address	##** ### ### ### ### ### ### ### ### ##	2018 SEP - 4 PN 3: 82
Tallahas	City/State and Zip Code		3: <b>6</b> 2
USEA S E-mail ad	87 @ gmail-com Idress: (to be used for future annu	al report notification)	
For further info	ormation concerning this matter, p	olease call:	
James Ant	hony Service II	at ( 850 ) 445-9734	_
	Name of Person	Area Code & Daytime Telephone Number	r
Registr Divisio Clifton 2661 E	et/Courier address: ration Section on of Corporations Building Executive Center Circle assee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclos	sed is a check for the following a	amount:	
<b>Æ</b> 1S25	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.

1. ì	Name of the limited liability company: Inection	Helico	pters L	LC.			
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	\					
	Tallahassee, FL 32309		Tallaha	Ssee FL	37300	<b></b>	
	<del></del>		<u>_</u> _				
3.	04-04-2016  Date of filing/registration in Florida	. <u> </u>		066458 ument number			
				ament number			
5. (a	Registered Agent and Registered Office shown on the records of the	he Florida D	ept. of State:				
	13302 Winding Oak Court	τ					
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)					
	_A	<u>-</u>			2010 SEL	CONTRACTOR OF THE PARTY.	
	Tampa .FL	33 <i>6</i>	517		ON SEP -4 PH 3: 52 SLUME DANY OF STATE ALLAHASSEE-FLORIDA	-	
(h	James Anthony Someon	+++			JSS.	-	
(0	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office addr	ess:				
					ORIG ORIG		
	NEW Registered Office Address:				) N		
	Tallahassee FL	<u>3</u> 22	09_				
the cagent was/	limited liability company is not organized under the law hange or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of tricles of organization or the operating agreement of the l	the registe bility com f the limit	red office and pany, it is here ed liability cor	the business of the confirmed of as otler	office of the that the cha	registered nge(s)	
A	may ( ) any what or but had igned representative of a mamber	<u> </u>	es Huth.	ted or typed name	Accionan	<u>T</u>	
f her provi the o to me notifi	rehy accept the appointment as registered agent and agressions of all statutes relative to the proper and complete to bligations of my position as registered agent as provided prely reflect a change in the registered office address. I have the writing of this change.	e to act it	ı this capacity	. I further agr	ree to comply	with the	
Sirght 	nture of Registered Agent  Division of Corporations P.O. B	ox 6327•	Tallahassee	FL 32314			

FILING FEE: \$25.00 INHS18 (2/14)