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HAY 21 1819 T. LEMEUX

COVER LETTER

TO: Registration Section Division of Corporation	s						
SBD Aircraft Br	SBD Aircraft Brokers, LLC						
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/	Registered Office C	hange and fee	e(s) are submitted for filing.				
Please return all correspondence	concerning this ma	itter to the fol	lowing:				
Linda Harrington							
Name o	f Person						
Dobbs Management Servi	ce						
Firm/C	ompany						
6070 Poplar Ave., Suite 75	50						
Addre	ess						
Memphis, TN 38119							
City/State a	and Zip Code						
linda@dobbsmanagement							
E-mail address: (to be use	I for future annual r	eport notifica	ition)				
For further information concern	ing this matter, plea	se call:					
Linda Harrington	at	901	684-1082				
Name of Person	1	1	Area Code & Daytime Telephone Number				
Registration SectionRegisDivision of CorporationsDivisClifton BuildingP.O.			LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, Florida 32314				
Enclosed is a check for the following amount:							
☑ \$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.

. No	ame of the limited liability company: SBD Aircraft E	3rokei	rs,	LLC	
. (a)	91 Dove Plum Road, Vero Beach, FL 32963		(b)	6070 Pc	plar Ave., #750, Memphis TN 381
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(-)	١	dailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	00/47/2046	- 	-	400004	1007
	08/17/2016	- 4	_ _	1600015	<u> </u>
	Date of filing/registration in Florida	4.			Document number
(a)					
	Registered Agent and Registered Office shown on the records of t			•	: :
	2400 E. Commercial Blvd. #204 Fort Lauder			33308	Fig. 23
	Registered Office Address (MUST BE FLORIDA STREET A	IDDRE:	<u>SS)</u>		NA SECTION OF THE PERSON OF TH
				<u></u>	
	, FL				No. of the second secon
	,				
(b)					
	Enter name of NEW Registered Agent and/or NEW Registered	Office a	<u>iddr</u>	<u>ess</u> :	- E
	NEW Registered Office Address:				
	1499 NE 60th Street				
	Fort Lauderdale , FL	3333	4		
e cha ent v us/w/ e arti	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- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the Juanua Muy	the reg ability of f the li limited	giste con imit I lia	ered office ipany, it is ed liabilit	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in apany.
igna	ture of a member or authorized representative of a member		-		Printed or typed name of signee
ovisi e obi mer	by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change.	ee to a perfor I for in tereby	ct ii mar i Cl cor	n this cap ice of my apter 605 ifirm that	acity. I further agree to comply with the duties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been

Signature of Registered Agent