## 16000164913

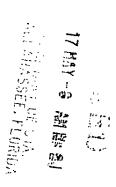
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## COVER LETTER

то:	Registration Section Division of Corporations	ļe.	
SUBJI	EKOAVIATION LLC.		
	Name	of Limited Liab	ility Company
Dear S	Sir or Madam:		
The en	nclosed Registered Agent/Registered Office	e Change and fe	e(s) are submitted for filing.
Please	return all correspondence concerning this	matter to the fol	lowing:
Erkar	n OZMERIC		
	Name of Person		
	Name of Ferson		
EKO	AVIATION LLC.		
	Firm/Company		•
3660	NE 166th St. Apt 709		
·-·	Address		
North	Miami Beach - FL - 33160		
	City/State and Zip Code		
eozm	eric@gmail.com		
E	E-mail address: (to be used for future annua	al report notifica	ition)
For fu	rther information concerning this matter, p	lease call:	
Erkar	OZMERIC	206	6310784
ï	Name of Person		Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:		LING ADDRESS:
	Registration Section Division of Corporations		stration Section ion of Corporations
	Clifton Building	P.O. Box 6327	
	2661 Executive Center Circle	Tallahassee, Florida 32314	
	Tallahassee, Florida 32301		
	Enclosed is a check for the following a	mount:	
	■ \$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

2. (a)	ame of the limited liability company:   16950 N.Bay Rd. Apt 717		(b) 16950 N.Bay Rd. Apt 717			
. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company:		
	Sunny Isles Beach - FL - 33160		(Note: MAY BE POST OFFICE BOX) Sunny Isles Beach - FL - 33160			
3.	09/02/2016  Date of filing/registration in Florida	L4.	16000164973 Docum	nent number		
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida I	Dept. of State:			
	Erkan OZMERIC		<u></u>			
	Registered Office Address (MUST BE FLORIDA STREET A	<u>ADDRESS)</u>		25 L.		
	Sunny Isles Beach , FL	33160		17 MAY		
(b)	Erkan OZMERIC			603 603 615 615 615		
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ess:			
	3660 NE 166th St. Apt 709			DO ME		
	NEW Registered Office Address:					
	North Miami Beach , FL	33160				
he cha igent v vas/we	imited liability company is not organized under the lawinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited like the authorized by an affirmative vote of the members of cles of organization of the operating agreement of the	the regist ability cor of the limit limited lis	ered office and the npany, it is hereby ed liability compa	e business office of the registered y confirmed that the change(s)		
Signat	ture of a member or authorized representative of a member	<del></del>	Printed	or typed name of signee		
I herei provisi he obl	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I	ree to act i performa d for in C	n this capacity. I nce of my duties, a napter 605, F.Ş. (	further agree to comply with the and I am familiar with and accep Or, if this document is being filed		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00