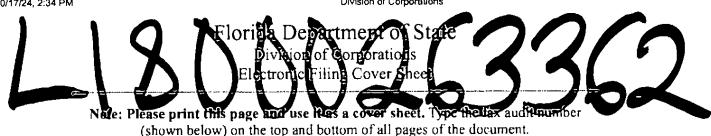
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Division of Corporations



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Doing so will generate another cover sheet. To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996 Firster the email address for this business entity to be used for future of the second ായ Dannual report mailings. Enter only one email address please.** Email Address: LLC REGISTERED AGENT CHANGE AIRPORT LOGISTICS PARK, LLC

Certificate of Status	0
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M. SOLOMON

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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.

I. Na	me of the limited liability company: AIRPORT LOGIS	TICS Pa	ARK, LLC	
2. (a)	189 S ORANGE AVE	(t	189 S OR	ANGE AVE
(**)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	ORLANDO, FL 32801	_	ORLAND	O, FL 32801
	11/14/2018		L18000263.	362
3.	Date of filing/registration in Florida	4.	1	Document number
5. (a)	CORPORATE CREATIONS NETWORK INC.			
	Registered Agent and Registered Office shown on the records of the S01 US HWY \perp N	he Floridi	Dept. of Stat	e.
	Registered Office Address	DDRES!	<u>0</u>	-
(b) .	PALM BEACH, FL , FL	33408		2024 OCT 17 SEGNE TALL TRAS
	C T Corporation System			
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		PR 3:2	
	NEW Registered Office Address:	_		- 21
	1200 South Pine Island Road			_
	Plantation, FL	33324		_
the cha agent was/wo	imited liability company is not organized under the law nge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited lial tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the legislation.	the regi bility co f the lin limited	stered office impany, it in ited liability liability con	e and the business office of the registered s hereby confirmed that the change(s) by company or as otherwise provided in
Signat	ure of a member or authorized representative of a member			Printed or typed name of signee
provisi the obl to merc notified By:	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address. The fin writing of this change. CT Corporation System CT Corporation System COLUMNIA SECRETARY	ee to ac. perform I for in ereby c	t in this cap ance of my Chapter 60, onfirm that	nacity. I further agree to comply with the duties, and I am familiar with and accep 5, F.S. Or, if this document is being filed the limited liability company has been