L19000 146171

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(Address)					
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COVER LETTER

TO: Registration Sc Division of Co	•					
	ON AIRCRAFT LLC					
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registere	d Agent/Registered Offic	ee Change an	nd fects) are submitted for filing.			
Please return all corres	pondence concerning this	matter to the	e following.			
T HOD COONED						
T. IVOR GOODWIN	Name of Person					
	Name of Person					
COCKPIT LLC						
	Firm/Company					
140 S APOLLO BLVD.						
	Address					
MELBOURNE FL 3290	I					
Ci	ty/State and Zip Code					
TIG@COCKPITGROU	P.AERO					
E-mail address: (to be used for future annu	ial report not	iffication)			
For further information	concerning this matter.	please call:				
T. IVOR GOODWIN		321 at (544 8700			
Name	of Person		Area Code & Daytime Telephone Number			
Mailing Add Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enclosed is a	check for the following	amount:				
■ \$25 Filing F	Fee	٥	\$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.	Ni	time of the limited liability company:THURSTON AIR	CRAFTILC	
2	(a)	COCKPITILC	(b) COC	KPIT LLC
	(4)	Principal office address of limited liability company. (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		140 S APOLLO BLVD MELBOURNE FL 32901	140 8	S APOLLO BLVD MELBOURNE FL 32901
		07/01/2019	1.1900	0166171
3.		Date of filing/registration in Florida COCKPIT LLC	4.	Document number
5.	(a)	Registered Agent and Registered Office shown on the records of 476 HIGHWAY ATA STE 4D, SATELLITE BEACH, FE Registered Office Address (MUST BE FLORIDA STREET).		
		476 HIGHWAY ATA STE 4D SATELLITE BEACH . FL	32937	2021 MAY 10 PALLAHASS
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	MAY TO AM 9: 28 ALLAHASSEL FLORIDA	
		NEW Registered Office Address:		
		140 S APOLLO BLVD.	-	
		MELBOURNE . FL	32901	
ch ag wa the liprote to	ange ent v is/we e arti Signa heres ovisi e obl mere	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia cre authorized by an affirmative vote of the members of cless of organization or the operating agreement of the large of a member or authorized representative of a member by accept the appointment as registered agent and agreement of statutes relative to the proper and complete ignition of my position as registered agent as provided by reflect a change in the registered office address. It is finitely of this change.	registered officability company of the limited lial limited liability THOMAS	ce and the business office of the registered v, it is hereby confirmed that the change(s) ability company or as otherwise provided in v company. IVOR GOODWIN Printed or typed name of signee Scanacity - I further agree to comply with the
		e of Registered Agent		

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