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Special Instructions to Filing Officer:	2022 JUL 15 PH 12: 18			

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TO: Registration Section Division of Corporations

SUBJECT: AERO MARINE SERVICE LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Melissa Jones

Name of Person

ZenBusiness Inc.

Firm/Company

336 E. College Ave. Suite 301

Address

Tallahassee, FL 32301

City/State and Zip Code

ra@zenbusiness.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melissa Jones	844 493-6249 at ()
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street. Suite 810
	Tallahassee, FL 32303

Enclosed is a check for the following amount:

\$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

2022 JUL 15 PH 12:

MULAHASSEE FI

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. Na	ame of the limited liability company: <u>AEI</u>	RO MARII	NE SER	VICE LLC			
2. (a)	13614 GARRIS DR		(b) 13614 GARRIS DR				
2. (u)	Principal office address of limited liability co (Note: MUST BE STREET ADDRES		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	HUDSON, FL 34667		HUDS	SON, FL 3466	7		
	05/08/2020		L2000	0125799			
3.	Date of filing/registration in Florid	la 4.		Document number			
5. (a)	Registered Agents Inc.			_			
	Registered Agent and Registered Office shown on th 7901 4th St N	e records of the Flor	ida Dept. of State	č :	2		
	Registered Office Address (MUST BE FLORID. STE 300	<u>A STREET ADDRI</u>	1221		2022 JUL 15	- M	
	St. Petersburg	, FL					
(b)	ZenBusiness Inc				PM 12: 1	D	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	Registered Office	<u>address;</u>		18		
	336 E. College Ave.						
	NEW Registered Office Address:			-			
	Suite 301			-			
	Tallahassee	, FL		-			
change agent v was/wo	imited liability company is not organized un or changes are made, the Florida street addivill be identical. Or, in the case of a Florida ere authorized by an affirmative vote of the picture of organization or the operating agreem	ress of the regist limited liability members of the l	ered office and company, it is imited liability	d the business office of is hereby confirmed that y company or as otherw	the reg	pistered ange(s)	
<u> s :</u>	/s/ Joel Bobst		Joel Bobst				
	ture of a member or authorized representative of a me			Printed or typed name of si			
1 nere provisi	by accept the appointment as registered age ions of all statutes relative to the proper and	ni ana agree to d complete perfor	ici in inis capa mance of my a	tuties, and I am familia	compl with	y with the	

provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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

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