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• • • • • • • • • • • • • • • • • • •	COVER	LETTER	
TO: Registration Section Division of Corporations			
Oceanic Airways, LLC. SUBJECT:			
	Name of Limited	Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Regist	ered Office Change an	d fee(s) are submitted for filing.	
Please return all correspondence conc	erning this matter to the	e following:	
Widey De Armas			
Name of Pers	on		
			N ÷
Firm/Compar	ıy		4771 104 (22 OCT
2610 NW 84th AVE #203			T H AM 5: 3
Address		<u></u>	
Doral, Florida, 33122			5: 37
City/State and Zi	p Code		
wideydearmas@gmail.com			
E-mail address: (to be used for f	uture annual report not	ification)	
For further information concerning th	s matter, please call:		
Widey De Armas	305 at (6804689	
Name of Person		Area Code & Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		<u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the f	ollowing 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.

2. (a) 2610 NW 84th Acc #203 Principal office address of limited liability company: (Nare: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Nare: MUST BE STREET ADDRESS) Doral, Florida 33122 Doral, Florida 33122 August 16, 2022 L.22000360153 3. Date of filing/registration in Florida 4. Prevent and Registered Office shown on the recents of the Florida Dept. of State 2610 NW 84th Acc #203 2610 NW 84th Acc #203, Florida 33122 Registered Office Address Mailing address of united liability company: (Nare: Must Be DST OFFICE R0X) (b) Herior Cocker L.22000360153 (c) Widey De Armus 4. Document number 2610 NW 84th Acc #203, Florida 33122 Registered Office Address Must BE FLORIDA STREET ADDRESS) (b) Herior Cocker	E. Na	ame of the limited liability com	Dany: Oceanic Airways,	LLC.				
Principal office address of invited itability company: (Note: MUST BE STREET ADDRESS) Mating address of invited itability company: (Note: MAY BE POST OFFICE BDX) Doral, Florida 33122		-		(h	2610 NW	V 84th Ave #203		
August 16. 2022 L22000360153 3. Date of filing/registration in Florida 4. Document number 5. (a) Widey De Armas Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 2610 NW 84th Ave #203, Florida 33122 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	2, (a)	•		(0) <u>.</u> .			
3. Date of filing/registration in Florida 4. Document number 5. (a) Widey De Armas Registered Agent and Registered Offec shown on the records of the Florida Dept. of Stne: 2610 NW 84th Ave #203, Florida 33122 Registered Office Address (MUST BE FLORIDA STREET ADDRESS) (b) Hector Crocker		Doral, Florida 33122	· · ·		Doral, Fl	orida 33122		
(a) Widey De Armas Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 2610 NW 84th Ave #203. Florida 33122 Registered Office Address (MUST BE FLORIDA STREET ADDRESS) (b) Hector Crocker Enter name of NEW Registered Agent and/or NEW Registered Office address: 2610 NW 84th Ave #203. Florida 33122 (b) Hector Crocker Enter name of NEW Registered Agent and/or NEW Registered Office address: 2610 NW 84th Ave #203. Florida 33122 (b) Hector Crocker Enter name of NEW Registered Agent and/or NEW Registered Office address: 2610 NW 84th Ave #203. Florida 33122 (b) Hector Crocker Enter name of NEW Registered Agent and/or NEW Registered Office address: 2610 NW 84th Ave #203. Florida 33122 (b) Hector Crocker (c) FL		August 16, 2022		_	L2200036	0153		
Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 2610 NW 84th Ave 4203, Florida 33122 Registered Office Address (h) Hector Crocker Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : 2610 NW 84th Ave #203, Florida 33122 NEW Registered Office Address: 2610 NW 84th Ave #203, Florida 33122 NEW Registered Office Address: 2610 NW 84th Ave #203, Florida 33122 NEW Registered Office Address: 2610 NW 84th Ave #203, Florida 33122 NEW Registered Office Address: 2610 NW 84th Ave #203, Florida 33122 NEW Registered Office Address:		Widey De Armas	ion in Florida	- 4.		Document number		
(b) Hector Crocker Enter name of <u>NEW Registered Arent and/or NEW Registered Office address:</u> 2610 NW 84th Ave #203, Florida 33122 NEW Registered Office Address:	J. (a)	Registered Agent and Registered Of		he Florida	Dept. of Str	ale:		
(b) Hector Crocker Enter name of NEW Registered Agent and/or NEW Registered Office address: 2610 NW 84th Ave #203, Florida 33122 NEW Registered Office Address:		Registered Office Address (MUS	T BE FLORIDA STREET A	DDRESS	2			
NEW Registered Office Address:			, FL				22 OCT	1 W 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
NEW Registered Office Address:	(b)	Hector Crocker						
NEW Registered Office Address:	(0)	Enter name of <u>NEW Registered Ag</u>	ent and/or <u>NEW Registered</u>	Office ad	dress:		11 51 51	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company or as otherwise provided in the articles of a member or authorized representative of a member of the limited liability company. I further agree to comply with the rows so fully accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rows 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 file 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.		2610 NW 84th Ave #203, Floric	a 33122				: 37	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Widey de Armas Signature of a member or authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the prover and complete performance of my duties, and I am familiar with and accept 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 Agent Signature of Agent		NEW Registered Office Address:						
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Widey de Armas Signature of a member or authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the prover and complete performance of my duties, and I am familiar with and accept 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 Agent Signature of Agent			E1			_		
Signature of a member or authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply 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 file 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 Hegistered Agent	change agent v was/we	or changes are made, the Flor will be identical. Or, in the case are authorized by an affirmative	organized under the law da street address of the c of a Florida limited lia c vote of the members o	registere bility co f the lim	ed office a mpany, it ited liabili	nd the business office of t is hereby confirmed that t ity company or as otherwi	he regis he chan	stered ige(s)
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Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314	Signatu	v	Cornorations P.O. B	lax 637'	/• Tallah	assee, FL 37314		

FILING FEE: \$25.00