## L23000352850

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## COVER LETTER

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TO:		stration Section tion of Corporations						
SUBJE	ECT:	AIRCOM CONNECT LLC						
		Name of Limited Liability Company						
Dear Si	ir or M	fadam:						
The end	closed	Registered Agent/Registered	Office Change an	d fee(s) are submitted for filing.				
Please	return	all correspondence concerning	g this matter to the	e following:				
LUIS E	ENRIQI	UE RODRIGUEZ H.						
	<del>-</del> · · ·	Name of Person		<del></del>				
AIRCO	ом со	NNECT LLC						
<del></del>	•	Firm/Company						
120 CO	OCO PL	UM DR						
		Address		<del></del>				
DAVE	NPORT	r, FL 33897						
		City/State and Zip Coo	le					
RDZLC	OUIS96	6@GMAIL.COM						
E	-mail a	address: (to be used for future	annual report not	fication)				
For fur	ther in	formation concerning this mat	ter, please call:					
LUIS E	ENRIQ	UE RODRIGUEZ H.	352 at (	764-1436				
		Name of Person		Area Code & Daytime Telephone Number				
	Regis Divis P.O.	ing Address: stration Section sion of Corporations Box 6327 hassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclo	osed is a check for the follow	ing amount:					
	<b>\$</b> 2	5 Filing Fee		\$55 Filing Fee & Certified Copy				
INHS18	3 (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.	Na	me of the limited liability company:  AIRCOM CONN	NECT	LLC			
2. (	a)	120 COCO PLUM DR		(b)	120 COC	CO PLUM DR	
٠. (	α,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(0,	•	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		DAVENPORT, FL 33897			DAVENE	ORT, FL 33897	
		07/26/2023		_	L2300035	2850	
3.		Date of filing/registration in Florida	4.	_		Document number	
5.	(a)	LUIS ENRIQUE RODRIGUEZ II.					
2. (w)		Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
		Registered Office Address (MUST BE FLORIDA STREET	<u>ADDR</u>	ESS		24 OCT	
		223 COCO PLUM DR					
		DAVENPORT , FI	3389	7		23 F	
(	b)	LUIS ENRIQUE RODRIGUEZ H.				- SEC ED	
		Enter name of NEW Registered Agent and/or NEW Registered	i Offic	<u>ę add</u>	ress:	0800 A	
		NEW Registered Office Address:				_	
		120 COCO PLUM DR				_	
		DAVENPORT , FI	3389	7		_	
char ager was	nge nt w /we	mited liability company is not organized under the lar or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited li- re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	regise ability of the	tered cor limi	l office ar npany, it i ted liabili	of the business office of the registered s hereby confirmed that the change(s) by company or as otherwise provided in	
				LUIS	ENRIQU	E RODRIGUEZ H.	
	_	ure of a member or authorized representative of a member				Printed or typed name of signee	
I he prov the c to m notij	reb visio obli vere fied	y accept the appointment as registered agent and agroups of all statutes relative to the proper and complete gations of my position as registered agent as provide ly reflect a change in the registered office address, I it is writing of this change.	ree to perfo d for hereb	act i rma in Ci y coi	n this cap nce of my napter 60. nfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	
Sign	atur	e of Registered Agent					