## 1990000 4970

(Requestor's Name)									
(Address)									
(Address)									
(City/State/Zip/Phone #)									
PICK-UP WAIT MAIL									
(Business Entity Name)									
(Document Number)									
Certified Copies Certificates of Status									
Special Instructions to Filing Officer:									

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## **COVER LETTER**

TO:

Registration Section

Divi	sion of Corporations							
SUBJECT:	Cablevision Air Facility, LLC							
	Name of Limited Liability Company							
Dear Sir or N	Madam:							
The enclosed	d Registered Agent/Registered Of	fice Change and	fee(s) are submitted for filing.					
Please return	all correspondence concerning the	his matter to the	following:					
Donna Co	lavito							
	Name of Person		<u> </u>					
0								
Granite As	ssociates, Inc.		<u> </u>					
	Firm/Company							
225 Banya	an Boulevard, Suite 130							
	Address		_					
Naples, FI	L 34102							
	City/State and Zip Code		<del>_</del>					
dcolavito@	granitelp.com							
E-mail	address: (to be used for future an	nual report notifi	cation)					
For further in	nformation concerning this matter	r, please call:						
Louis J. Be	oyd	239	228-6505					
	Name of Person		Area Code & Daytime Telephone Number					
Regi Divi Clift 2661	REET/COURIER ADDRESS: istration Section sion of Corporations on Building I Executive Center Circle ahassee, Florida 32301	Re <sub>l</sub> Div P.C	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following amount:								
<b>2</b> 1 \$2	25 Filing Fee	<b>□</b> \$5	5 Filing Fee & Certified Copy					
INHS18 (2/14	<b>!</b> )							

## 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. N	ame of the limited liability company: Cablevision A	ir Fac	ilit	y, LLC				
2. (a)	One Cablevision Center	(b) P.O. Box 311						
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `			Mailing address o		-	
	Liberty, NY 12754	_	-	Liberty,	NY 12754			
	August 11, 1999	_	L	.990000	004970			
3.	Date of filing/registration in Florida	4.			Document nu	mber		
5. (a)	United Corporate Services, Inc.							
(	Registered Agent and Registered Office shown on the records of the 9200 South Dadeland Blvd.	ne Florio	da I	Dept. of Stat				
Registered Office Address (MUST BE FLORIDA STREET AD						57		
	Suite 508				<del>_</del>		2018	
	Miami .FL	3315	6			AH.	\$	תר
(b)					<b>-</b> -	ASSEE, I	HAY ILL P	ILE
	Enter name of NEW Registered Agent and/or NEW Registered (	Office a	<u>ddr</u>	<u>'ess</u> :		ر 10 ت	P# 3:	
	225 Banyan Boulevard					ORIO,	24:	-
	NEW Registered Office Address:				_	,, **	1.4	
	Suite 130				_			
	Naples, FL	34102	2	·	_			
the ch agent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of itselfs of organization or the operating agreement of the l	the reg bility of the lin	iste con mit	ered offic npany, it i ed liabilit	e and the busing is hereby confir ty company or a	ess office med that	of the	registered nge(s)
	nus (Doyl	Lo	uis	s J. Boy				
<b>✓</b>	ature of a member of authorized representative of a member	4			Printed or typed	-	•	141 41
provis the ob to mei	by afcept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflectia change in the registered office address, I ha a in writing of this change.	ee to ac perforn for in ereby (	ct ii nar Ch con	n this cap ace of my apter 60. afirm that	pacity. I further duties, and I a 5, F.S. Or, if th the limited lial	r agree to m familia iis docum bility com	comply r with a ent is b pany ha	with the and accept eing filed as been
Signat	ure of Registered Agent							
/ Signal	Division of Corporations P.O. B.	ov 421	7-	Tallaha	eena El 21214	1		