## MC 8000002373

| (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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Office Use Only



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17 JUN 14 PH 12: 08
DIVISION OF CORFORATIONS

O SIMMAONS JUN 15 2017



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Jiminez ashley.jiminez@cscglobal.com

Date: June 12, 2017

Order#: 676499-007

Re: STRIKE AVIATION LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX \_\_\_ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ashley Jiminez c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

**QUCA.XCOA** 

## 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. 1                              | Name of the limited liability (  | company: STRIKE AVIAT  | ION LLC  |  |   |           |
|-----------------------------------|--|--|--|--|---|-----------|
| 2. (a                             | 7791 NW 46th Street  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  |  | (b)  | Maili  | NW 46th Street  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)   |           |
|                                   | Suite 321  |  |  | Suite 321  |   |           |
|                                   | DORAL  | FL 33166   |  | DORAL, FL  | 33166   |           |
|                                   | 05/20/2008   |  |  | M080000023   | 73  |           |
| 3.                                | Date of filing/reg   | istration in Florida   | 4.   | Do   | cument number   |           |
| 5. (3                             | () CT CORPORATION S  | YSTEM  |  |  |   |           |
| ·                                 |  | d Office shown on the records of   | the Florida  | Dept, of State:  | Q   |           |
|                                   | 1200 SOUTH PINE ISLAND ROAD  |  |  |  | 1 1   | 7         |
|                                   | Registered Office Address (MUST BE FLORIDA STREET ADDRESS)   |  |  |  | 至至  |           |
|                                   |  |  |  |  | 0° C  | 1         |
|                                   | PLANTATION   |  | 22224  |  | 17 JUN 14 PH 12: 05   | -11-6     |
|                                   | PLANTATION   | FI   | 33324  | <del></del>  | <u>ن</u> بن   | •         |
| (b                                | ) Corporation Service Com  | ากลกง  |  |  | 4 <b>9</b>  | •         |
| (.)                               | ′ <del></del>  | J Agent and/or NEW Registered  | l Office add   | ress:  | 5   |           |
|                                   |  |  |  |  |   |           |
|                                   | 1201 Hays Street   |  |  |  |   |           |
|                                   | NEW Registered Office Addres   | 881  |  |  |   |           |
|                                   |  |  |  |  |   |           |
|                                   |  |  |  |  |   |           |
|                                   | Tallahassee  | FT   | , 32301  |  |   |           |
| the clagent<br>was/s              | hange or changes are made, t<br>will be identical. Or, in the  | not organized under the lashe Florida street address of case of a Florida limited listive vote of the members of | ws of the f<br>the regist<br>lability cor<br>of the limi | ered office and<br>npany, it is he<br>ted liability co | a, it is hereby confirmed that afte<br>d the business office of the regist<br>reby confirmed that the change(s<br>ompany or as otherwise provided<br>by.                  | ered<br>) |
|                                   | Xiel & G   | Dui  | Jill C   | ilmi, Authorize  | d Person  |           |
| Sigi                              | nature of a member of authorized re  | presentative of a member   |  |  | nted or typed name of signee  |           |
| provi<br>the o<br>to me<br>notifi | sions of all statutes relative in the ligations of my position as in the relative in the relat | to the proper and complete registered agent as provide registered office address. I                              | e performa<br>ed for in C<br>hereby co                   | nce of my duti<br>hapter 605, F.,<br>nfirm that the    | y. I further agree to comply with<br>es, and I am familiar with and ac<br>S. Or, if this document is being f<br>limited liability company has bee<br>Asst. Vice President | cept      |
|                                   | 2 Corpor   | ation Service Company  | D. v. ( 127)   | . 10 . 11 . 1  | EL 23214  |           |