Division of Corporations Electronic Filing Cover Sheet

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LLC REGISTERED AGENT CHANGE SUPREME AIR, LLC

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Corporate Filing Menu

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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. SUPREMÉ AIR, LLC 1. Name of the limited liability company: 2601 Bayshore Drive Suite 1700 2601 Bayshore Drive Suite 1700 Mailing odders of limited liability company: Principal office address of limited liability company: (Nois: MAY BE POST OFFICE BOX) (Note: HUST BE STREET ADDRESS) Miami, Florida 33.133 Miami, Florida 33133 M08000002556 6/6/2008 Document number Date of filing/registration in Florida CORPORATION SERVICE COMPANY Registered Agent and Registered Office shows on the records of the Florida Dept. of Slate: 1201 HAYS STREET OSUST BE FLORIDA STREET ADDRESS) Registered Office Address 32301-2525 TALLAHASSEE Business Filings Incorporated (b) Enter mane of NEW Registered Agent and/or NEW Registered Office address: 1200 South Pine Island Road NEW Registered Office Address: 33324 Plantation 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 nuthorized 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.

bulliarized representative of a member 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 filed to marely refrect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Neven Brail, Authorized Representative

Printed or typed name of signee

Water ---- Mark Williams, AVP, Business Filings Incorporated

Signature of Registered Agent

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

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