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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Strategic Name of Lin	Air Finance I, LLC mited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Jason Yacoub Name of Person				
Strategic Air Finance, UC Firm/Company				
1000 Waterford Way, Suite 930 Address				
Miami, FL 33126 City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Vanette Carrillo at (305) 979-5868 Name of Person Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:				
☐ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			

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

Name of the limited liability company:	Strategic	Air Finance	e I, UC
2. (a)	(b)	
Principal office address of limited liabili (Note: MUST BE STREET ADD	ty company:	Mailing addres	s of limited liability company: **BE POST OFFICE BOX**)
1000 Waterford Way,	<u>, Suite93</u> 0	1000 Water	Ford Way, Suite 930
Miami, FL 33121	<u>e</u>	Miami, FL	33126
7/18/2013			0004507
3. Date of filing/registration in Fl	orida 4.	Document :	number
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida	Dept. of State:	
Registered Office Address (MUST BE FLO)		_	2
NRAI Services,	Inc., 1200	South Pine	Island Rood
Plantation	FL_33	324	·
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Ajent</u> and/or <u>NEW Registered Ajent</u> and/or <u>NEW Registered Office Address:</u> 1000 Waterford Water	TEW Registered Office add	dress:	FILED FILED SECRETARY OF STATE SECRETARY OF STATE TALLANDASSEE, FLORIDA
<u>Miami</u>	, FL_ <u>33</u>	126	→
If the limited liability company is not organized the change or changes are made, the Florida stragent will be identical. Or, in the case of a Florwas/were authorized by an affirmative vote of the articles of organization or the operating agr	eet address of the regis rida limited liability co he members of the lim	stered office and the bu impany, it is hereby cor ited liability company o	siness office of the registered infirmed that the change(s)
Signature of a member or authorized representative of a	- manuhar	Ja500	ed name of signee
I hereby accept the appointment as registered provisions of all statutes relative to the proper the obligations of my position as registered age to merely reflect a change in the registered offinotified in writing of this change. Signature of Registered agent	agent and agree to act and complete perform ont as provided for in C ce address, I hereby co	in this capacity. I furt ance of my duties, and i Chapter 605, F.S. Or. i onfirm that the limited l	her agree to comply with the