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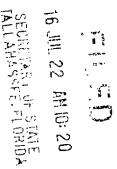
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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07/22/16--01022--013 **25.00



J. HARRIS



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: April Pagliassotti april.pagliassotti@cscglobal.com

Date: July 20, 2016

Order#: 176522-015

Re: COLCHESTER AVIATION, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

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: April Pagliassotti 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.

I. Na	ame of the limited liability company: <u>COLCHESTER</u>	OITAIVA	DN, LLC
2. (a)	3520 Embassy Drive, Suite 302 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (b)	500 North Dixie Highway, Suite 302 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	West Palm Beach, FL 33401	_	Coral Gables, FL 33146
	10/24/2013		M13000006860
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	C T Corporation System		
()	Registered Agent and Registered Office shown on the records of th	e Florida I	Dept. of State:
	1200 South Pine Island Road		
	Registered Office Address (MUST BE FLORIDA STREET A)	DDRESS)	<u></u> 5)
			五名 克
	Plantation , FL	33324	
(b)	Corporation Service Company		
	Enter name of NEW Registered Agent and/or NEW Registered C	Office add	
	1201 Hays Street		ATE ARIBA
	NEW Registered Office Address:		
	Taliahassee FL	22201	
	, FL_	32301	
the cha agent v was/we the arti Signa I here provisi the obl	imited liability company is not organized under the lawsinge 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 clessof organization or the operating agreement of the liabere of a member of a member of a member of a member of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I he is in writing of this change	the regist bility cor the limited limited limited limited	stered office and the business office of the registere ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in liability company. Printed or typed name of signee to comply with the change of the register of
	Inaco Cornolo	BY: Gr	race E. Kirby, Asst. Vice President

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