M14000001683

<u></u>						
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
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SECRETARY OF STATE
TALLAHASSEF STATE

2021 AUG - 5 PH 3: 4

V.

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 942000 4722300						
AUTHORIZATION Spelleman						
COST LIMIT : \$ 25.00						
ORDER DATE : August 3, 2021						
ORDER TIME : 2:32 PM						
ORDER NO. : 942000-095						
CUSTOMER NO: 4722300						
CHANGE OF AGENT						
NAME: HONDA AVIATION FINANCE COMPANY, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Alexxis Weiland						
EXAMINER'S INITIALS:						

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.

. Na	me of the limited liability company: HONDA AVIAT	TON FINA	NCE CO	MPANY, LLC	
(a)	1919 Torrance Boulevard	(h`)		
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Mail Stop: 100-5E-8A				
	Torrance, CA 90501	<u> </u>			
	03/13/2014	1	M1400000	01683	
	Date of filing/registration in Florida	- _{4.} -		Document number	
(2)	C T Corporation System				
(b) <u>.</u>	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of Sta	te:	
	1200 South Pine Island Road			s 2	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			2021 AUG -5 SECRETARY TALLAHA	
	Plantation, FL	33324		_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
				SEC ₹	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			M 8:41 OF SIMIE SEE, FL	
	Corporation Service Company				
	NEW Registered Office Address:				
	1201 Hays Street			_	
	Tallahassee , FL	32301			
ange ent w s/we	mited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- tere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registered ability con of the limi	l office ar npany, it i ted liabilit	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in	
	I Cilmi	Jill C	ilmi, Auth	orized Person	
. T	ure of a member or authorized representative of a member			Printed or typed name of signee	
hereb ovisio e obli mere tifieg	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. It is writing of this change.	performand for in Cl hereby con orporatio	nce of my hapter 603 hirm that n Service	duties, and I am familiar with and accepts. F.S. Or, if this document is being filed the limited liability company has been a Company	
gnatur	re of Registered Agent	mi w. Ca	isper, As	st. Vice President	