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PICK-UP	☐ WAIT	MAIL				
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Certified Copies	Certificates	of Status				
Special Instructions to F	iling Officer:					
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Matthew Ermak matthew.ermak@cscglobal.com

Date: September 6, 2019

Order#: 902571-020

Re: ORLANDO STARFLYER, 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: Matthew Ermak c/o Corporation Service Company 251 Little Falls Drive 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.	Na	me of the limited liability company: ORLANDO STA	RFLYE	R, LLC			
2. (a)		8265 International Drive, Suite B		8265 ا	8265 International Drive, Suite B		
,	, .	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		Orlando FL 32819	_	Orlando	o, FL 32819		
		06/19/2014		M14000	004369		
3.		Date of filing/registration in Florida	4.		Document number		
5. (	a)	CT CORPORATION SYSTEM			_		
,	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of Sta	ite;			
	1200 SOUTH PINE ISLAND ROAD						
		Registered Office Address (MUST BE FLORIDA STREET)	1DDRESS	!			
		PLANTATION .FL	33324		2019 SEP	•"•	
(b)	o)	Corporation Service Company				CONTRACTOR	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ado	lress:	CO T	(1992) (1992) (1994)	
		1201 Hays Street			_ <del>. F</del>	Varit	
		NEW Registered Office Address:			r ω		
		Tallahassee FI	32301				
the c agen was/	ha t w we	mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia- re authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	vs of the the regis ability co of the lim limited I	tered office mpany, it ited liabilitability con	ce and the business office of the re is hereby confirmed that the chan ity company or as otherwise provi impany.	egistered ge(s)	
Sie	Signature of a member or authorized representative of a member				, Authorized Person  Printed or typed name of signee		
I her prove the o to me notif	reh isio bli ere iea	ov occess 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 in writing of this change.  The of Registered Agent Corporation Service Company	performa d for in C hereby co	ince of my hapter 60 infirm thai	nacity. I further agree to comply	with the d accept ing filed been	

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