M1800000 4290

| (Requestor's Name) | | | | | |
|-----------------------------------------|--|--|--|--|--|
| (Additional) | | | | | |
| (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: | | | | | |
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Office Use Only



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2019 JAN 25 PM 1: 36

C. GOLDEN FEB - 4 2019



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Anthony Arthur anthony.arthur@cscglobal.com

Date: January 23, 2019

Order#: 568058-128

Re: GLOBAL JET CAPITAL WORLDWIDE, 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: Anthony Arthur 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. N | ame of the limited liability company: GLOBAL JET CA | PITAL V | VORLDWIDE, LLC |
|----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2. (a) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | _ (b) | 83 WOOSTER HEIGHTS RD, STE 503 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | DANBURY, CT 06810 | - - | DANBURY, CT 06810 |
| | 05/02/2018 | _ | M18000004290 |
| 3. | Date of filing/registration in Florida | 4. | Document number |
| 5. (a) | C T CORPORATION SYSTEM | | |
| 2. (, | Registered Agent and Registered Office shown on the records of th | e Florida | Dept. of State: |
| | 1200 SOUTH PINE ISLAND ROAD | | 201 |
| | Registered Office Address (MUST BE FLORIDA STREET AL | | |
| | | | - Carmin |
| | PLANTATION .FL | 33324 | SSE 3 M |
| (b) | Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered C | Office add | |
| | 1201 Hays Street | | |
| | NEW Registered Office Address: | | |
| | Tallahassee, FL | 32301 | |
| the ch agent was/w | limited liability company is not organized under the laws ange or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited liab were authorized by an affirmative vote of the members of icles of organization or the operating agreement of the li | he regist bility cor `the limi | ered office and the business office of the registered npany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in |
| | Xie E. aloni | Jill C | ilmi, Authorized Person |
| Sign | ature of a member or authorized representative of a member | | Printed or typed name of signed |
| provis the ob to mer | by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided rely reflect a change in the registered office address, I he d in writing of this change. | erforma for in C | nce of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed |
| Signati | are of Registered Agent Corporation Service Company | BY: Gr | ace E. Kirby, Assistant Vice President |