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(Re	questor's Name)	
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 100790 AUTHORIZATION : COST LIMIT : \$ 25.00 ORDER DATE : October 31, 2023 ORDER TIME : 10:30 AM ORDER NO. : 100790-181 CUSTOMER NO: 8429380 CHANGE OF AGENT NAME: MITSUBISHI POWER AERO LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ____ CERTIFIED COPY XX PLAIN STAMPED COPY CONTACT PERSON: Eyliena Baker

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.

1.	Name of the limited liability company: MITSUBISI	HI POWER AERO	LLC	
2. (a	628 Hebron Avenue, Suite 400	(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)	
	Glastonbury, CT 06033			
	07/24/2018	M180	00006791	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a	C T Corporation System			
J. (4	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
	1200 South Pine Island Road			
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESS)		
		•		
	Plantation	33324		
		, FL		
(b			- · ·	
(0	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regist</u>	ered Office address:		
	Corporation Service Company		<u>:</u>	
	NEW Registered Office Address:			
	1201 Hays Street			
	120 i Haya Gireet			
	Tallahassee	, FL_32301		
chang agent was/v	limited liability company is not organized under the e or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the membe ticles of organization or the operating agreement of /s/ Jill Cilmi	the registered officed liability company its of the limited liability the limited liability	te and the business office of the registered (it is hereby confirmed that the change(s) (ability company or as otherwise provided in	
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee	
I here provis the ob	by accept the appointment as registered agent and it ions of all statutes relative to the proper and completions of my position as registered agent as provely reflect a change in the registered office address, and in writing of this change.	ete performance of ided for in Chapter , I hereby confirm i	capacity. I further agree to comply with the	
	Cumley	•	• •	
Signat	are of Registered Agent	- Ami ivi. Caspe	r, Asst. Vice President	