

M18 000000 6791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

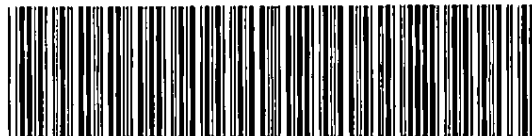
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 NOV 21 AM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ACCOUNT NO. : I20000000195

REFERENCE : 100790 8429380

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: _____

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.

2. (a) 628 Hebron Avenue, Suite 400
Principal office address of limited liability company:
(Note: ***MUST BE STREET ADDRESS***)

(b) _____
Mailing address of limited liability company:
(Note: ***MAY BE POST OFFICE BOX***)

INHS18 (2/14)