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SECRETARY OF STATE

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COVER LETTER

Division of Corporations			
SUBJECT: Kelly Aviation Anc. Name of Corporation			
DOCUMENT NUMBER: NØ3 ØØØØ 1 Ø 41			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Robert Gray Sample Name of Contact Person			
Kelly Aviation Firm/Company			
Firm/Company			
36035. Lightner Dr.			
Address			
Tampa FL 33629 City/State and Zip Code gray sample 1 o gmail. com			
E-mail address: (to be used for future annual report notification)			
E-man address. (to be used for future annual report normeation)			
For further information concerning this matter, please call:			
Name of Contact Person at (13) 917 9762 Area Code & Daytime Telephone Number			
Name of Contact Person Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Street Address:			

Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

CR2E045 (03/12)

TO:

Amendment Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of 1.1508.
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Kelly Aviation Inc
2. The principal office address: 3603 S. Lightney Dr.
3. The mailing address (if different):
4. Date of incorporation/qualification: 12-3-03 Document number: N 63 0000 10 40
5. The name and street address of the current registered agent and registered office on file with the
Allon Kelly 34101 Olana Ct. Dade (ith 71 33573 Lutz FL 3354)
34101 Olana Ct. 2623 Rabeitson the
Dade City 7-1 33523 (1413)
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Robert Array Sample 3603 S. Liabhuer Dr
3603 S. Lightner Dr. P.O. Box NOT acceptable Tempa 71 33629 FISS &
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Signature of an officer or dipotor Printed or typed name and title
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Robert Gray Sample 9-11-13 Signature of Registed Agent Date
If signing on behalf of an entity:
Typed or Printed Name

* * * FILING FEE: \$35.00 * * *