

N13 00000 5244

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

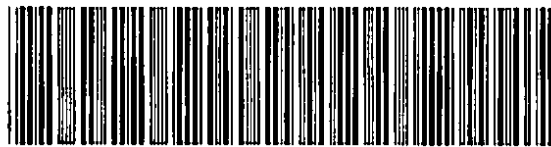
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2021 NOV 30 AM 8:35

SECRETARY OF STATE
TALLAHASSEE, FL 32399



2021 NOV 30 AM 10:41



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 3, 2021

ROBERTA REIDY
5525 NW 15 AVE
UNIT 203
FORT LAUDERDALE, FL 33309 US

SUBJECT: HONOR FLIGHT SOUTH FLORIDA INC.
Ref. Number: N13000005244

We have received your document and check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

- The form you submitted is for a LLC, but your entity is a NON-PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Jasmine N Horne
Regulatory Specialist II

Letter Number: 321A00026850

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HONOR FLIGHT SOUTH FLORIDA INC.
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERTA REIDY

Name of Person

AVIATION CPAs

Firm/Company

5525 NW 15 AVE #203

Address

FORT LAUDERDALE, FL 33309

City/State and Zip Code

bobbir@aviationcpas.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Roberta Reidy at (954) 763-9363

Name of Person Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- ☐
- \$25 Filing Fee
- ☐
- \$55 Filing Fee & Certified Copy

**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: HONOR FLIGHT SOUTH FLORIDA INC.

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
7580 NW 5 STREET #16821
PLANTATION, FL 33317

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
7580 NW 5 STREET #16821
PLANTATION, FL 33317

3. JUNE 5, 2013 Date of filing/registration in Florida

4. N13000005244 Document number

5. (a) RICK ASPER (DECEASED)
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
3000 NE 30TH PLACE #107
FORT LAUDERDALE, FL 33306

(b) MIKE MISKEW
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:
7580 NW 5 STREET #16821
PLANTATION, FL 33317

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Roberta J. Reidy
Signature of a member or authorized representative of a member

Roberta J Reidy
Printed or typed name of signer

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Mike Miskew
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

FILED
2021 NOV 30 AM 8:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA