

P 00000086674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

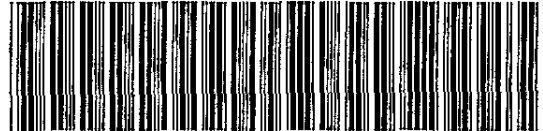
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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12/5



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

September 8, 2003

DONALD H. FUGENT
BLUE MAX AIRCRAFT, INC.
480 STONELAND ROAD
ENTERPRISE, FL 32725

SUBJECT: BLUE MAX AIRCRAFT, INC.
Ref. Number: P00000086674

We have received your document for BLUE MAX AIRCRAFT, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

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) 245-6880.

Karen Gibson
Document Specialist

Letter Number: 203A00049807

RECEIVED

03 DEC -4 AM 9:40

DIVISION OF CORPORATIONS

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BLUE MAX AIRCRAFT, INC.
(Name of corporation)

DOCUMENT NUMBER: P00000086674

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:

DONALD H. EUGENT
(Name of person)

Blue MAX Aircraft, Inc.
(Name of firm/company)

480 Stone Island Rd.
(Address)

ENTERPRISE, FL 32725
(City/state and zip code)

For further information concerning this matter, please call:

DONALD EUGENT at (407) 328-8850
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**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
FLORIDA in order to change its registered office or registered agent, or both, in the State
of Florida.

1. The name of the corporation: BLUE MAX AIRCRAFT, INC.
2. The principal office address: 480 STONE ISLAND RD., ENTERPRISE, FL 32725
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 09/13/2000 Document number: P0000086694

5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

CLAYTON D. SIMMONS, ESQ.

480 STONE ISLAND RD.

ENTERPRISE, FL 32725

6. The name and street address of the new registered agent (if changed) and /or registered office (if
changed):

FRANK C. WHIGHAM ESQ.

SUITE 22

300 WEST FIRST STREET

(P.O. Box or personal mailbox NOT acceptable)

SANFORD, FL. 32772

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.

Donald H. Fugent
(Signature of an officer, chairman or vice chairman of the board)

DONALD H. FUGENT C.E.O.
(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.)

[Signature]
(Signature of Registered Agent)

12/2/03
(Date)

If signing on behalf of an entity:

(Typed or printed Name)

(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314