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| (Requ | ıestor's Name) | |
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| (Addr | ess) | |
| (Addr | ess) | |
| (City/ | State/Zip/Phone | · #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Busi | ness Entity Nan | ne) |
| (Document Number) | | |
| Certified Copies | Certificates | of Status |
| Special Instructions to Fi | ling Officer: | |
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SLUGLIANY OF STATE
FALLAHASSEE, FLORIDA

COVER LETTER

| TO: Amendment Section Division of Corporations |
|---|
| SUBJECT: Alleng Comporate Office 2. Vice t |
| DOCUMENT NUMBER: 102000122455 |
| 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: |
| Silvana Sinning (Name of contact person) |
| Deno Space Technician |
| 8187 NW 7154 (Address) |
| MIAMI F2 33166 (City/state and zip code) |
| For further information concerning this matter, please call: |
| (Name of contact person) at (305, 4639333) (Area code & daytime telephone number) |
| (Artea code de daytine telephone humber) |

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 +LORIDA in order to change its registered office or registered agent, or both, in the State of Florida. |
| m order to change its registered office of registered agent, or both, in the blade of Provide. |
| 1. The name of the corporation: Aerospace schulcion, CCD, |
| 2. The principal office address: 818+12W 715theat |
| MIAN 72 33166 |
| 3. The mailing address (if different): 52me 05 25000 |
| DO200012146 |
| 4. Date of incorporation/qualification: 111602 Document number: 1020012245 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: |
| Dinocrates Sinning President |
| 8187 NW 71 Street |
| MIAMI TO 33166 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| (if changed): Dino J. Sinning as Vice-Presider |
| 8187 NW 719t |
| (P.O. Box NOT acceptable) |
| MIAMI FR 93166 |
| 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. |
| Agriculture of an officer or director) Dino (Frinted or typed name and title) |
| I hereby actes the uppointment 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. |
| Signafule of Registered Agent) 08 24/05 (Date) |
| If signing on behalt of an entity: |
| Dinavates Sinning (Typed or Printed Name) |
| * * * FILING FEE: \$35.00 * * * |
| MAKE CHECKS PAVABLE TO FLORIDA DEPARTMENT OF STATE |
| MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32374 |