

P08000070625

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Angelica M. Chiu, Paralegal
Account Name : AVILA RODRIGUEZ HERNANDEZ MERA & FERRI
Account Number : I20070000136
Phone : (305) 779-3564
Fax Number : (305) 779-3561

SECRETARY OF STATE
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REGISTERED AGENT CHANGE

LUSO AIR CORP.

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FAX AUDIT # H09000098525

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: Luso Air Corp.
2. The principal office address: 7270 NW 12th Street, Penthouse 3
Miami, FL 33126
3. The mailing address (if different): Same as above.
4. Date of incorporation/qualification: 07/25/2008 Document number: P08000070625
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Devine Goodman Pallot Rasco & Wells P.A.Attn: Joseph W. Pallot777 Brickell Avenue, Suite 850, Miami, FL 33131

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

Interamerican Corporate Services LLC2525 Ponce de Leon Blvd., Suite 1225

(P.O. Box NOT acceptable)

Coral Gables, FL 33134

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]
(Signature of an officer or director)

Antonio M. Esteves, Director
(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.

By [Signature] Marco Ferri, Manager
(Signature of Registered Agent)

4/23/09
(Date)

If signing on behalf of an entity:

N/A
(Typed or Printed Name)

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

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

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