

PD8000095789

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600239085556

09/07/12--01022--001    \*\*35.00

RD-AAA  
C. Long  
S. J. [Signature]

FILED  
2012 SEP -7 AM 10:31  
SEC. TOLSON  
FALLAHASSA, FLORIDA



2211 Whitfield Park Ave, Sarasota FL 34243  
Office: 941-747-8800 Fax: 941-747-4949  
CAC1816062

To: Amendment Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Date: Aug. 4, 2012

To whom it may concern,

I am writing today to inform you that my company has moved. The Principal Address, Mailing Address, Registered Agent Address, and Officers Address should all be changed to reflect our new address of 2211 Whitfield Park Ave. Sarasota, FL 34243. Should there be any questions or if you need to contact me, please feel free to call my office at 941-747-8800.

Sincerely,

A handwritten signature in cursive script, appearing to read "Scott D. Whitaker".

Scott D. Whitaker  
President: Arctic Air Services Inc.  
2211 Whitfield Park Ave  
Sarasota, FL 34243

*"Arctic Air Services adds value to your home and comfort to your life"*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Arctic Air Services Inc.

Name of Corporation

**DOCUMENT NUMBER:** P08000095789

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:

Scott D. Whitaker

Name of Contact Person

Arctic Air Services Inc.

Firm/Company

2211 Whitfield Park Ave

Address

Sarasota, FL 34243

City/State and Zip Code

scott@arcticair4me.com

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

For further information concerning this matter, please call:

Scott D. Whitaker

Name of Contact Person

at ( 941 ) 747-8800

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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

1. The name of the corporation: Arctic Air Services Inc.
2. The principal office address: 2211 Whitfield Park Ave. Sarasota, FL 34243
3. The mailing address (if different): same
4. Date of incorporation/qualification: 10/23/2008 Document number: P08000095789
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)

Scott D. Whitaker  
2420 Landings Cir NW  
Bradenton, FL 34209

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

Scott D. Whitaker  
2211 Whitfield Park Ave  
P.O. Box NOT acceptable  
Sarasota, FL 34243

FILED  
2012 SEP -7 AM 10:31  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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.

Scott D. Whitaker  
Signature of an officer or director

Scott D. Whitaker - President  
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.*

Scott D. Whitaker  
Signature of Registered Agent

09/04/2012  
Date

If signing on behalf of an entity:

Scott D. Whitaker

Typed or Printed Name

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