## P11000003534

(1	Requestor's Name)			
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(,	Address)			
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Propellerhead Aviation, Inc.

Name of Corporation

P1100003534

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:

## William Boege Name of Contact Person Firm/Company 3086 21st NW Address Winter Haven, FL 33881

bill@propellerheadaviation.com

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

City/State and Zip Code

For further information concerning this matter, please call:

William Boege
Name of Contact Person

at (863) 288-0540
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

	provisions of sections 607.0502, 617. ange is submitted for a corporation or			<i>.</i>	
	er to change its registered office or re	_	•		
1. The name of	the corporation: PROPELLERH	EAD AVIATION	, INC.		
2. The principal	l office address: 3086 21st NW				
	aven, FL 33881				
3. The mailing a	address (if different): same				
4. Date of incor	rporation/qualification: 01/10/201	1 Document	number: P11000003534	ļ	
	d street address of the current register artment of State: (If resigned, enter res		d office on file with the		
	William E. Boege, III				
	1225 N. Lake Otis Dr. SE				
	Winter Haven, FL 33880				
6. The name an (if changed):		agent (if changed) an	d /or registered office	TE AUG 13 AM DI E	
	William E. Boege, III			===	
	3086 21st NW	***************************************		Ġ	
	Winter Haven, FL 33881	NOT acceptable		,	
The street addr as changed wil	ress of its registered office and the str l be identical.	eet address of the bu	siness office of its registered	agent,	
Such change wauthofized by t	vas authorized by resolution duly ado the beard, or the corporation has been	pted by its board of controls in notified in writing o	irectors or by an officer so f the change.		
_	Jan W	William E. I			
I hereby accep I further agree performance of agent. Or, if the	ture of an officer or director  If the appointment as registered agen  It to comply with the provisions of all  If my duties, and I am familiar with a  In this document is being filed merely to  It that the corporation has been notifi	t and agree to act in statutes relative to th nd accept the obligat reflect a change in ti	e proper and complete ion of my position as register ne registered office address, l	red !	
the	- Down	.7	1 2012		
	gnature of Registered Agent		Date		
If signing on be	ehalf of an entity:				
	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 CR2E045 (03/12)