Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067 : (845)425-0077

Fax Number .: (845)818-3588

**Enter the email address for this business entity to be used for further annual report mailings. Enter only one email address please #*

Email Address:

REGISTERED AGENT CHANGE AIRSIDE PAVEMENT INC.

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida ange is submitted for a corporation organized under the laws of the State of er to change its registered office or registered agent, or both, in the State of I	Florida	•
	the corporation: Airside Pavement Inc.	rioriag,	
1. The name of	I office address: 873 Hull Rd Unit #14	<u> </u>	
• •	Beach, FL 32174		
3. The mailing a	address (If different):		
4. Date of incom	poration/qualification: 06/26/2014 Document number: P1400	0055463	
	d street address of the current registered agent and registered office on file w riment of State: (If resigned, enter resigned)	ith the	•
•	VCORP SERVICES, LLC		
	5011 SOUTH STATE ROAD 7, SUITE 106	安 李	<u> </u>
	DAVIE, FL 33314		
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered of	fice SSE	81
	Ben Follman	四分	A
	873 Hull Rd Unit #14	OR.	9: 51
	P.O. Box NOT acceptable Ormond Beach, FL 32174	5 m	£
The street addre	ess of its registered office and the street address of the business office of its identical.	registered ager	nt,
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an che board, or the corporation has been notified in writing of the change.	officer so	
Ba Fu	Ben Follman, VP		•
	the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and commy duties, and I am familiar with and accept the obligation of my position is document is being filed merely to reflect a change in the registered office that the corporation has been notified in writing of this change.	_	,
-Ba 7	7/18/2014		
Sign	parate of Registered Agent Date		٠.
If signing on bel	half of an emity:		
Ben Follma			
75	yped or frinted 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
CR2E645 (03/12)