P14000070903

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(0.9,00000_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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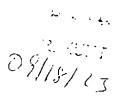
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COVER LETTER

SOUTH FLORIDA SPORT AVIATION, INC	
Name of Corporation	
DOCUMENT NUMBER: P14000070903	
The enclosed Statement of Change of Registered Office/Agent and fee are submit	ted for filing.
Please return all correspondence concerning this matter to the following:	
LUIZ CLAUDIO MAIA FERREIRA Name of Contact Person	
SOUTH FLORIDA SPORT AVIATION, INC	•
Firm/Company	
7432 SKYLINE DRIVEHANGAR 01	
Address	
DELRAY BEACH, FL 33446	
City/State and Zip Code	
LUIZ.FERREIRA@SFSPORTAVIATION.COM	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
LUIZ CLAUDIO MAIA FERREIRA 31 (561) 923-85	59
Name of Contact Person at (561) 923-85 Area Code & Daytic	ne Telephone Numbe

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

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

statement of cha	nge is submitted for a corporation orga	02, 607.1508, or 617.1508, Florida Statutes, t nized under the laws of the State of <u>FLORID</u> tered agent, or both, in the State of Florida,	
I. The name of t	he corporation: SOUTH FLORIDA SPO	RT AVIATION, INC	
		HANGAR 01, DELRAY BEACH, FL 33446	
3. The mailing a	ddress (if different):	P14000070903	
4. Date of incorp	poration/qualification:	Document number: P14000070903	
	I street address of the current registered a timent of State: (If resigned, enter resign	agent and registered office on file with the ed)	
	ELO ENTERPRISES INC		
	4700 NW BOCA RATON BLVD STE 20)2	
	BOCA RATON, FL 33431		
6. The name and (if changed):	I street address of the new registered age	ent (if changed) and /or registered office	2023 8-31 18
	1WAY TAX SERVICES LLC		<u>.</u>
	1701 W HILLSBORO BLVD SUITE 208	3	- -
	P.O. Box NOT acceptable		
	DEERFIELD BEACH, FL 33442		1.21R4
The street addre	ess of its registered office and the street be identical.	address of the business office of its register	ed agent,
Such change wa authorized by th	is authorized by resolution duly adopte ne board, or the corporation has been no	d by its board of directors or by an officer so otified in writing of the change.	3
In Ha-	do un Torun	LUIZ CLAUDIO MAIA FERREIRA - VP	
Signatur	re of an officer or director	Printed or typed name and title	
I furthér agrée t of my duties, an docúment is bei	the appointment as registered agent an to comply with the provisions of all stated an familiar with and accept the ob- ng filed merely to reflect a change in the been notified in writing of this change	tutes relative to the proper and complete per ligation of my position as registered agent, he registered office address. I hereby confirt	rformance Or, if this n that the
A	MU	08/30/2023	
igi	nature of Registered Agent	Date	
If signing or bel	half of an entity:		
MARCIA SALV.	ADOR		
Ty	ped or Printed Name		

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