

P/5000030915

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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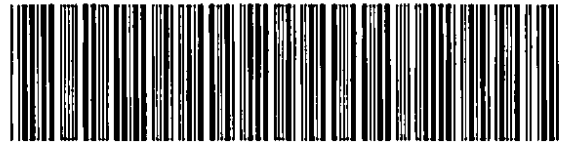
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL


R. White

R. WHITE

SEP 13 2018

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Stat Air Solutions, Inc.

Name of Corporation

DOCUMENT NUMBER: P15000030965

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:

Randolph Casanas

Name of Contact Person

Stat Air Solutions, Inc.

Firm/Company

9351 NW 25th Street

Address

Sunrise, Florida 33322

City/State and Zip Code

randycasanas29@gmail.com

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

For further information concerning this matter, please call:

Randolph Casanas

Name of Contact Person

at (954) 980 8924

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 10, 2018

Randolph
RANDOLF CASANAS
9351 NW 25TH ST
SUNRISE, FL 33322

SUBJECT: STAT AIR SOLUTIONS, INC.
Ref. Number: P15000030965

We have received your document for STAT AIR SOLUTIONS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 6 must be completed. Please complete section 6 with the new registered agent's information.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist II

Letter Number: 918A00016557

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SEP 12 2018
SECRETARY
TALLAHASSEE

**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: Stat Air Solutions, Inc.
2. The principal office address: 9351 NW 25th Street, Sunrise, Florida 33322
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 04/01/2015 Document number: P15000030965
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)

Randolph Casanas

701 Vista Isles Dr. #1621
Plantation, FL 33325

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

Randolph Casañas
9351 NW 25th Street
P.O. Box NOT acceptable
Sunrise, FL 33322

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TALLAHASSEE, FL

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

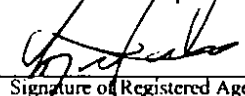
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

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.


Signature of Registered Agent

07/30/2018

Date

If signing on behalf of an entity:

Typed or Printed Name

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