## P16891

(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



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200 West A dams Street, Suite 2007 Chicago, IL 60606 (312) 346-3606 (800) 934-2556 Fax: (312) 346-3607

October 26, 2009

VIA REGULAR MAIL

Division Of Corporations Florida Department Of State P.O. Box 6327 Tallahassee, FL 32314

RE: Duncan Aviation, Inc.

Dear Sir or Madam:

Enclosed please find one original and one photocopy of the forms to change the registered agent/office for the above captioned in your state. Also enclosed is a check for the required fee.

Please file with your office and return evidence to my attention at the letterhead address.

If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,

Norine Nagel TA/smc.

Encl.

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

statement of cha	inge is submitted for a corporation organi	2, 607.1508, or 617.1508, Florida Statutes, zed under the laws of the State of Nebraska red agent, or both, in the State of Florida.	, this
	the corporation:	,	
0.00	cc 11 3701 Aviation Road Linco	In NE 68524	
	ddress (if different):		
4. Date of incorp	poration/qualification: 11/19/1987	Document number: P16891	**
5. The name and	street address of the current registered ag tment of State:		09 OCT 30 MI 10: 59
	Capitol Corporate Services, Inc.		
	155 Office Plaza Drive, Suite A		<b>6</b>
	Tallahassee, FL 32301		46.
6. The name and (if changed):	street address of the new registered agent	(if changed) and /or registered office	59
	NRAI Services, Inc.		
	2731 Executive Park Drive,	Suite 4	
	Weston, FL 33331		
The street addre as changed will	ss of its registered office and the street a be identical.	ddress of the business office of its registe	ered agent,
Such change wa authorized by th	s authorized by resolution duly adopted the board, or the corporation has been not	by its board of directors or by an officer ified in writing of the change.	so
(Signatur	re of an officer or director)	Thomas B. Fischer, Secretary (Printed or typed name and title)	
I hereby accept I further agree to of my duties, and document is bein corporation has	the appointment as registered agent and o comply with the provisions of all statu d I am familiar with and accept the oblig ng filed merely to reflect a change in the been notified in writing of this change	agree to act in this capacity. tes relative to the proper and complete p ation of mv position as registered agent. registered office address, I hereby confit	erformance Or, if this rm that the
//W/v	N.J. M.J. Manure of Registered Agent)	10/26/09.	·
If signing on bel	nalf of an entity:		
	el-Assistant Secretary		
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MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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