

P19000 067 239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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2019 NOV 12 P 11 54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REC 1 2 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 4MKAIR CORP
Name of Corporation

DOCUMENT NUMBER: P19000067239

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:

JOSE Almenas
Name of Contact Person

4MKAIR Corp
Firm/Company

10450 Turkey Lake Rd #691664
Address

Orlando FL 32869
City/State and Zip Code

4MKAIR@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE Almenas at (407) 8506-5957
Name of Contact Person 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**

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: 44K AIR Corp
2. The principal office address: 10450 Turkey Lake Rd. # 691664
Orlando FL 32869
3. The mailing address (if different): 6838 Axis West Cir #2409
Orlando FL 32821
4. Date of incorporation/qualification: 9/1/19 Document number: 1219000067239
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)
- _____
- _____
- _____

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

Deborah Long
6838 Axis West Cir #2409
Orlando FL 32821

P.O. Box NOT acceptable

STATE OF FLORIDA
TALLAHASSEE

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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]
Signature of an officer or director

Jose Almaraz
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]
Signature of Registered Agent

10/31/19
Date

If signing on behalf of an entity:

Typed or Printed Name

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