

P92 0000010715

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

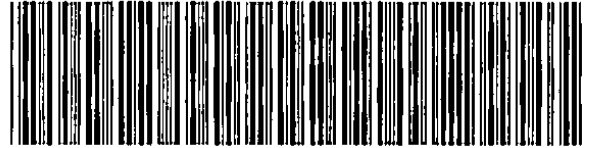
(Business Entity Name)

(Document Number)

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09/26/22--01007--019 **25.00

02/02/23--01021--004 **10.00

2023 FEB 23 PM 1:14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 21, 2022

LOWELL J KUVIN
17 E FLAGLER ST STE 223
MIAMI, FL 33131

SUBJECT: NATIONAL AIR CHARTERS, INC.
Ref. Number: P92000010715

We have received your document for NATIONAL AIR CHARTERS, INC. and your check(s) totaling \$25.00. However, the document has not been filed and is being retained in this office for the following:

The incorrect form was submitted to our office.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6052.

Jessica A Fason
Regulatory Specialist II

Letter Number: 422A00028621

2022-12-21 11:24:43

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: National Air Charters, Inc.
Name of Corporation

DOCUMENT NUMBER: P92000010-715

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:

Lowell J. KVIN
Name of Contact Person

LAW OFFICE OF LOWELL J. KVIN
Firm/Company

17 E FLAGLER ST, SUITE 223
Address

MIAMI, FL 33131
City/State and Zip Code

LOWELL @ KVIN. LAW.
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LOWELL J. KVIN at (305) 358 6800
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: NATIONAL AIR CHARTERS, INC.
2. The principal office address: 10 CANAL DR, STE 175
MIAMI, FL 33166
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/7/1992 Document number: P92000010715
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)

Jorge Y Alvarez Jr
10 CANAL DR STE 175
MIAMI, FL 33166

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

Lowell J. Kuvvin
17 E FLAULER ST, SUITE 223
P.O. Box NOT acceptable
MIAMI, FL 33131

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 officer or director

Jorge Y Alvarez
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

1/3/23
Date

If signing on behalf of an entity:

LOWELL KUVVIN ESQ.
Typed or Printed 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
CR2E045 (04/13)