

P96000033254

Requestor's Name

**EDGE** AVIATION SERVICES, INC.

P.O. Box 437

Ft. Lauderdale, FL 33302 USA

000002746760--4

-01/20/99--01002--001

\*\*\*\*\*70.00 \*\*\*\*\*35.00

Office Use Only

ER(S), (if known):

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time \_\_\_\_\_  
☐ Mail out ☐ Will wait ☐ Photocopy

- ☐ Certified Copy  
☐ Certificate of State

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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99 JAN 15 PM 12:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
98 DEC 30 AM 9:05  
DIVISION OF CORPORATIONS

R.A. charge

\*1055, 109, 767\* 1-20-99



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

January 4, 1999

EDGE AVIATION SERVICES, INC.  
Post Office Box 437  
Ft. Lauderdale, FL 33302

SUBJECT: EDGE AVIATION SERVICES, INC.  
Ref. Number: P96000033254

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

Please sign and return your check along with this document in order to complete your filing.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6910.

Louise Flemming-Jackson  
Corporate Specialist Supervisor

Letter Number: 099A00000137

Office Phone

954-767-6473

**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, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: EDGE AVIATION SERVICES, INC.
2. The mailing address of the corporation is: PO BOX 437  
FORT LAUDERDALE FL 33312
3. Date of incorporation/qualification: 4-9-86 Document number: P96000033259(9)
4. The name and address of the current registered agent and office:  
Paul E Tomlinson  
2796 S. UNIVERSITY DR Apt 2106  
DAVIE FL 33328
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)  
Ronald L LaFleur  
1016 SW 15th PLACE  
FORT LAUDERDALE FL 33312

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 JAN 15 PM 12:43

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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.

Ronald L LaFleur 28 Dec 98  
(Signature of an officer, chairman or vice chairman of the board) (Date)  
Ronald L LaFleur - President 28 Dec 98  
(Printed or typed name and title) (Date)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Ronald L LaFleur 28 Dec 98  
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:  
Ronald LaFleur President  
(Typed or Printed Name) (Capacity)