

P97000039000

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

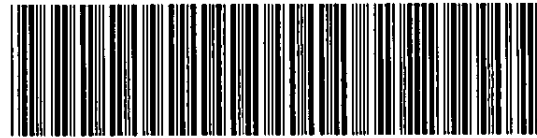
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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*R. White*  
APR 18 2013  
R. WHITE

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

13 APR 11 PM 12:23

FILED



**CAPITOL  
SERVICES**

**Statement of Change of Registered Office  
or Registered Agent or Both for  
Corporations**

**Capitol Corporate Services, Inc.**  
PO Box 1831  
Austin, TX 78767  
Phone: 800-345-4647 Fax: 800-432-3622  
regagent@capitol-services.com

**Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314**

**DATE:** 4/8/2013  
**STATE:** FLORIDA  
**REP UNIT:** **MIAMI AVIATION SERVICES, INC.**

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Enclosed for filing please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations for the above referenced name, which is to be filed in your office. Enclosed is check #23855 in the amount of \$35.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please call 800-345-4647 and ask for the Change of Agent Section of the Registered Agent Department.

Should you need to return this document for any reason please send it to:

Capitol Corporate Services, Inc.  
PO Box 1831  
Austin, TX 78767

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Capitol Corporate Services, Inc.  
Registered Agent Services



13-26985R

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: AERONAUTICAL AIRMOTIVE MODIFICATIONS, INC.
2. The principal office address: 6555 NW 36TH ST 300-1 VIRGINIA GARDENS, FL 33166
3. The mailing address (if different): P.O. BOX 524515 MIAMI, FL 33152-4415

4. Date of incorporation/qualification: 5/1/1997 Document number: P97000039000
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)

MARQUEZ, JOSE M

782 NW 42ND AVENUE SUITE 548

Street Address

MIAMI

City

FL

State

33126

Zip Code

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

Capitol Corporate Services, Inc.

155 Office Plaza Drive, Suite A

Street Address

P.O. Box NOT acceptable

Tallahassee

City

FL

State

32301

Zip Code

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

ANA MARGARTIA LLOBERA, 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.

Delanie Case  
Signature of Registered Agent

4-5-13  
Date

If signing on behalf of an entity:

Delanie Case, Asst. Secretary on behalf of Capitol Corporate Services, Inc.

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

CR21045 (03/12)

FILED  
13 APR 11 PM 12:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Capitol Corporate Services, Inc.

155 Office Plaza Drive, Suite A

Street Address

P.O. Box NOT acceptable

Tallahassee

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Zip Code

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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, director

ANA MARGARITA LLOBERA, 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  
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Delanie Case

Signature of Registered Agent

4-5-13

Date

If signing on behalf of an entity:

Delanie Case, Asst. Secretary on behalf of Capitol Corporate Services, Inc.

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 (03/12)

Return acknowledgment to: Andy



Capitol Corporate Services, Inc.  
P.O. Box 1831 Austin, TX 78767  
800/345-4647