## P99000087750

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	·
(, , , ,		,
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	<del></del>

Office Use Only



700043118937

12/05/04--01006--001 \*\*95.00

Rochange



## Aviation Legal Group, P.A.

X

FORT LAUDERDALE EXECUTIVE AIRPORT (FXE)
5525 Northwest 15th Avenue, Suite 200 • Fort Lauderdale, FL 33309 USA
Telephone: 954-763-5565 • Fax: 954-763-8488
Website: aviationlegalgroup.com

Scott C. Burgess
Douglas J. Barnard\*
Charles R. Morgenstein
Robert M. Palmer
\*Also admitted in the District of Columbia

December 1, 2004

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

RE:

Aeroparts Solutions, Inc.

Our File: 213-01

To Whom It May Concern:

Enclosed please find the original Statement of Change of Registered Office or Registered Agent or Both for Corporations, which has been completed to reflect the new address for the Registered Agent. Also enclosed is a check in the amount of Thirty-Five United States Dollars (US\$35.00) representing the filing fee.

Please update your records immediately, as the fee for same has already been tendered. Please contact me immediately (954-763-5565) should you have any question with regard to this matter.

Kindest Regards,

AVIATION LEGAL GROUP, P.A.

Allison Sass, Paralegal allisons@aviationlegalgroup.com

enclosures

## TRANSMITTAL LETTER

**TO:** Amendment Section Division of Corporations

SUBJECT: AeroParts Solutions, Inc.		
DOCUMENT NUMBER: P99000087750		<del></del>
The enclosed Articles of Amendment and fee are	e submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Scott C. Burgess, Esquire		
(Nam	e of Person)	
Aviation Legal Group, P.A.		
(Name of	Firm/ Company)	
5525 NW 15th Avenue, Suite 200		
(A	Address)	
Fort Lauderdale, Florida 33309		
(City/ Stat	e/ and Zip Code)	
For further information concerning this matter, p	lease call:	
Adriana Tejeda	at ( 954 ) 763-5565	
(Name of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for the following amount:		
✓ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address  Amendment Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399	

## 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: Aeroparts Solutions, Inc.
2. The principal office address: 13720 N.W. 23 Street, Pembroke Pines, Florida 33028
3. The mailing address (if different):
4. Date of incorporation/qualification: 9/3/1999 Document number: P99000087750
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Scott C. Burgess
1041 SE 17th Street, PH
Fort Lauderdale, Florida 33316
Fort Lauderdale, Florida 33316  5. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Scott C. Burgess, Esquire
Scott C. Burgess, Esquire
5525 NW 15th Avenue, Suite 200
(P.O. Box NOT acceptable)
Fort Lauderdale, Florida 33309
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)  Angel Ramos - Président (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 of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

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