Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : FASTKIT CORP

Account Number : I20100000009 Phone : (305)599-0839

Fax Number : (305)592-9591

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Email Address:

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AIRSEATRANS LLC

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Certificate of Status	0
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Estimated Charge	\$25.00

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AIRSEATRANS LLC					
(Name of the Limited Liability Company as (A Florida Limited Liability	it now appears on our records.) by Company)				
The Articles of Organization for this Limited Liability Company were filed on 02/01/816 Florida document number L16000021260		and a	and assigned		
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liability of	company here:				
The new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation "LLC" or th	c abbreviation	"L.L.C.		
(Principal office address MUST BE A STREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·				
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		18 70 ps -	E33	5	
Enter new mailing address, if applicable:				n mer Kindag Z makenya	
(Mailing address MAY BE A POST OFFICE BOX)				₫ 611500 g	
			I	ges manufo.	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	address on our records, <u>en</u>	er the nan	<u>16Դ1</u>	the new	
Name of New Registered Agent:					
New Registered Office Address:					
	Enior Florida street addross				
	Florida				

New Registered Agent's Signature, if changing Registered Agent:

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

...

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

A ...

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	GABRIEL S. DIAZ-SARMIENTO	5600 SW 135 AVE SUITE 106-1	
		MIAMI, FL 33183	■ Remove
			Change
MGR	KAREN CANDEBAT	1345 NW 98 CT BUILDING A, #1	_ Add
		DORAL, FL 33172	Remove
			☐ Change
			D Add
			□ Remove
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ive date, if other than the date ective date is listed, the date must be stif the date inserted in this block cent's effective date on the Depart	specific and cannot be prior to date does not meet the applicable s	of filing or more than 90 days	ptional)	- - -
ecord specifies a delayed eff e 90th day after the record	fective date, but not an is filed.	effective time, at 12:0	1 a.m. on the earl	ier (
od 02/19/2016				

Page 3 of 3

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