L03000002856

(Requestor's Name)
(Address)
•
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(0)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500305445925

11/08/17--01001--007 **30.00

17 NOV -7 AH 8: 18
JINISHNA 7 7 AH 8: 18

O SIMMONS NOV 0 8 2017

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

<u> </u>				
Aircraft and Engine Su	apport, LLC			
	· · · · · · · · · · · · · · · · · · ·			
				
		_		
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
			<u>X</u>	L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend, File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
				Photo Copy
			<u></u>	Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature	 _			Fictitious Owner Search
0				Vehicle Search
				Driving Record
Requested by: SETH	11/07/17			UCC 1 or 3 File
Name	Date	Time		UCC 11 Search
нише	vaic	Time		UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

COVER LETTER

TO:	Registration S Division of Co							
SHBIE	Aircraft a	nd Engine Support, LLC						
SUBJE	CI	Name of Lin	nited Liability Company					
The enc	losed Articles of	f Amendment and fee(s) are sub	omitted for filing.					
Please r	eturn all corresp	ondence concerning this matter	to the following:					
		Maria Shaw						
			Name of Person	_				
Aircraft and Engine Support, LLC								
			Firm/Company					
		6300 NW 99th Ave						
			Address					
		Miami, FL 33178						
			City/State and Zip Code					
		marias@ane.aero						
		E-mail address: (to be used for future annual report notifi	ication)				
For furth	ner information of	concerning this matter, please co	all:					
Maria S			305 699-0882					
	Name o	of Person	at () Area Code Daytime	Telephone Number				
Enclosed	d is a check for t	he following amount:						
□ \$2 5.	00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Aircraft and Engine Support, LLC		
(<u>Name of the Limited 1</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	· · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited Liabi	lity Company were filed on 1/23/2003	and assigned
This amendment is submitted to amend the followi	ng:	
A. If amending name, enter the new name of th	e limited liability company here:	
TL		
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC" or the	
Enter new principal offices address, if applicabl	e:	22 :
(Principal office address MUST BE A STREET A	(DDRESS)	
		= -
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	x	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>en</u> <u>address here</u> :	ter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
-	City	Zip Code

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.

If Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	Address	Type of Action		
MGR	Eduardo T. Garrido	6300 NW 99th Ave, Miami, FL 33! 78			
			■ Remove		
			Change		
MGR	Ricardo Torres	6300 NW 99th Ave, Miami, FL 331 78			
			🗆 Remove		
			Change T		
			一類種品		
			Remove U		
			Change Remove Change		
			Add		
			Remove		
			Change		
			□ Add		
			Remove		
			Change		
			Remove		
			☐ Change		

·_										
_										
_			<u> </u>			_		· · · · · · · · · · · · · · · · · · ·		
-										
_						 .		- ·		
				 -						
_		_		· · · · · · · · · · · · · · · · · · ·	-			-	罗古	
_					_	<u> </u>			17 Kg	، سر. س
_								<u></u> .	<u> </u>	\ '
_										Ċδ ₹
										Ç.
	<u> </u>					······································			<i>z</i> ′	60
_										
_		<u>-</u>		<u> </u>						
_	 				_					
									, , , , , , , , , , , , , , , , , , , 	
_								· · ·		
fectiv	ve date, if other	than the da	ite of filing	! :			(0	ontional)		
ote. I	ective date is listed, the list of the date inserted ent's effective date	in this bloci	caoes not m	iect the app	ilicable stati	filing or more itory filing re	than 90 days equirements	after filing.) I this date w	Pursuant to 605.0 ill not be listed)207 (3) i as the
reco	ord specifies a 90th day after	delayed e	ffective d d is filed.	ate, but	not an efi	ective tim	e, at 12:(01 a.m. o	n the earlie	r of:
ated _	10/16/20	17	<u>,</u>							
		1 _	X	+						
		Si	nature of a n	nember of at	thorized rep	esentative of	a member			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00