L18000127404

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

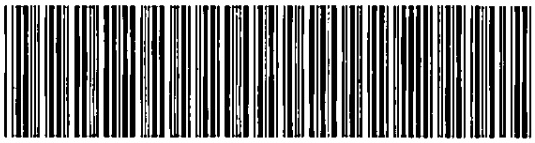
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700331598427

FILED

2018 JUL 22 P 5:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

# COVER LETTER

TO: **Registration Section**
**Division of Corporations**

SUBJECT: FLORIDA AVIATION NETWORK, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Edda De Jesus-Percy
Name of Person

Florida Aviation Network
Firm/Company

3850 W 108th St
Address

HIALEAH, FL 33018
City/State and Zip Code

edda@mdturbines.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edda De Jesus-Percy at (678) 554-8945
Name of Person — Area Code — Daytime Telephone Number

Enclosed is a check for the following amount:

☐ $25.00 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)

FILED
09 JUL 22 PM 2:

**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

FILED

2018 JUL 22 P 5:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA AVIATION NETWORK, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/21/2018

Florida document number L18000127404

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**
***(Principal office address MUST BE A STREET ADDRESS)***

3850 W 108th St
HIALEAH, FL 33018

**Enter new mailing address, if applicable:**
***(Mailing address MAY BE A POST OFFICE BOX)***

3850 W 108th St
HIALEAH, FL 33018

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: Edda De Jesus-Percy

New Registered Office Address: 725 Beach Dr.
*Enter Florida street address*

Destin, Florida 32541
*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**

| Title | Name | Address | Type of Action |
|---|---|---|---|
| P | BERENGUER, RAMON M | | ☐ Add |
| | | 3484 SE 3RD ST<br>HOMESTEAD, FL 33033 | ☐ Remove |
| | | | ☐ Change |
| MGR | DARR-FERNANDEZ, JACQUELINE | | ☐ Add |
| | | | ☐ Remove |
| | | DARR, JACQUELINE | |
| | | | ☐ Change |
| MGR | Edda De Jesus-Percy | 725 Beach Dr.<br>Destin, FL 32541 | ☐ Add |
| | | | ☐ Remove |
| | | | ☐ Change |
| | | | ☐ Add |
| | | | ☐ Remove |
| | | | ☐ Change |
| | | | ☐ Add |
| | | | ☐ Remove |
| | | | ☐ Change |
| | | | ☐ Add |
| | | | ☐ Remove |
| | | | ☐ Change |

D. **If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

MGR DARR-FERNANDEZ, JACQUELINE will be changing her name to DARR, JACQUELINE

DE JESUS, MANUEL will be acting President.

6/25/2019

E. **Effective date, if other than the date of filing:** _____ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated June 25, 2019

Signature of a member or authorized representative of a member

Edda de Jesus Percy

Typed or printed name of signee



**Filing Fee: $25.00**