

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000034412

**Entity Name:** AVIATION MANAGEMENT SALES, LLC

**Current Principal Place of Business:**

2916 CURTIS KING BLVD  
HANGER E-19  
FORT PIERCE, FL 34946

**Current Mailing Address:**

1945 S.W GOLD LANE  
PORT ST LUCIE, FL 34953

**FEI Number: 90-0363474**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

HINKLE, BRIAN L  
1945 S.W. GOLD LANE  
PORT ST.LUCIE, FL 34953 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title	MGR	Title	ACCOUNTING
Name	HINKLE, BRIAN	Name	GARAY, MILDRED
Address	1945 S.W. GOLD LANE	Address	1945 S.W GOLD LANE
City-State-Zip:	PORT ST LUCIE FL 34953	City-State-Zip:	PORT ST LUCIE FL 34953

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: BRIAN HINKLE**

**MGR**

**03/29/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date