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.

MANAGER

SIGNATURE: MENDOZA GHENIVER

Electronic Signature of Signing Authorized Person(s) Detail

HIALEAH, FL 33018 US

The a State of Florida.

SIG

Authorized Person(s) Detail :

Title	MANAGER	Title	MANAGER
Name	MENDOZA, GHENIVER V	Name	PINERO, LESLYE J
Address	3575 W 97TH STREET	Address	3575 W 97TH STREET
City-State-Zip:	HIALEAH FL 33018	City-State-Zip:	HIALEAH FL 33018

above named e	ntity submits this statement for the purpose of changing its registered office or registered agent, or both, in the Sta
SNATURE:	
	Electronic Signature of Registered Agent
therized D	arcon(c) Detail :

Entity Name: SERVICIOS AEREOS PROFECIONALES LLC

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

3575 W 97TH STREET HIALEAH, FL 33018

Current Mailing Address:

DOCUMENT# L2000000640

3575 W 97TH STREET HIALEAH, FL 33018

FEI Number: 84-4014470

Name and Address of Current Registered Agent:

MENDOZA, GHENIVER V 3575 W 97TH STREET

FILED Jan 19, 2020 Secretary of State 6832328680CC

Certificate of Status Desired: No

01/19/2020

Date

Date