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EXAMINER

COVER LETTER

TO:	Registration So Division of Cor				
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SUBJE	CT:	Luna Airp	ort Shuttle L.L.C.		
	***************************************	Name of Lim	ited Liability Company		
The enc	losed Articles of	Amendment and fee(s) are sul	omitted for filing.		
Please r	eturn all correspo	ondence concerning this matter	to the following:		
			Brian Robert Luna		
		,	Name of Person		
		Lur	na Airport Shuttle L.L.C.		
			Firm/Company		
1783 Sunrise Pl.					
			Address		
			Clearwater, Fl. 33755		
			City/State and Zip Code		
		Opo E-mail address: (i	erations@ase-djs.com to be used for future annual report notific	eation)	
For furth	er information c	oncerning this matter, please o	all:		
		n Robert Luna		76-7051	
	Name o	f Person	Area Code & Daytime	Telephone Number	
Enclosed	l is a check for th	ne following amount:			
₹ 25.0	0 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

FILED

2012 JAN 12 PM 12: 22

Lu	na Airport S	Shuttle L.L.C.	S.C. i	20 74 70 10
(Name of the Limited (A	Liability Compa Florida Limited I	ny as it now appears Liability Company)	on our records	RETARY OF STATE CHASSEE, FLORIDA
The Articles of Organization for this Limited Liz Florida document numberL03000020		were filed on	June 9th 2003	and assigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and end with "L.L.C."	n the words "Limi	ted Liability Company	," the designation "l	LC" or the abbreviation
Enter new principal offices address, if applicable:		1783 Sunrise F	ગ	
(Principal office address MUST BE A STREET ADDRESS)		Clearwater, Fl.	33755	
Enter new mailing address, if applicable:		1783 Sunrise F	PI.	
(Mailing address MAY BE A POST OFFICE BOX)		Clearwater. Fl.	33755	
B. If amending the registered agent and/o registered agent and/or the new registered off			r records, enter t	he name of the new
Name of New Registered Agent:	Brian Robert Luna			
New Registered Office Address:	1783 Sunris		<u> </u>	
		Enter	· Florida street add	ress
	C	learwater	, Florida	33755
		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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager of Managing Member being added or removed from our records:

MGR = Manager . MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
CEO	Robert Luna	774 Snug Island Clearwater Beach, Fl. 33767	Add Remove
PRES	Kevin Luna	774 Snug Island Clearwater Beach, Fl. 33767	Add Remove
PRES	Brian Luna	1589 Greenlea Dr. Unit 1 Clearwater, Fl. 33755	✓ Add Remove
SECY	Mary E. Luna	1783 Sunrise Pl. Clearwater, Fl. 33755	Add Remove
TRES	Brian Luna	1589 Greenlea Dr. Unit 1 Clearwater, Fl. 33755	[7] Add Remove
TRES	Mary E. Luna	1783 Sunrise Pl. Clearwater, Fl. 33755	Add
D. If amen —	ding any other information, ento	er change(s) here: (Attach additional sheets, if necess	ary.)
_			
Dated	January 9th	2012	2012 JAN SECRETA
	Signature of a	member or authorized representative of a member Brian Robert Luna	I2
		Typed or printed name of signee	3
		Page 2 of 2	PHE: 2

Filing Fee: \$25.00