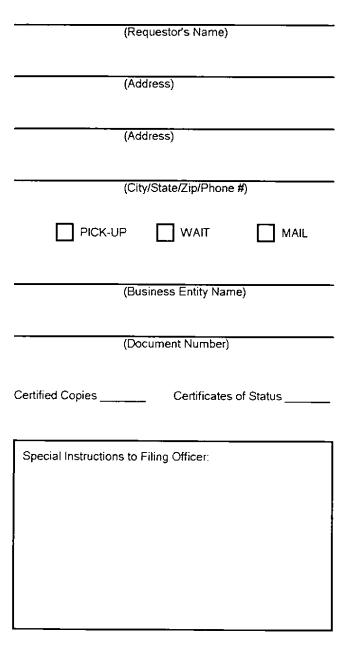
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R. WHITE APR 2 4 2019



COVER LETTER

	Registration Se Division of Cor								
SUBJEC	Luna Airpo	Luna Airport Shuttle LLC							
SUBJEC	.1;	Name of Limited Liability Company							
The encle	osed Articles of	Amendment and fee(s) are sub	mitted for filing.						
Please re	turn all correspo	ondence concerning this matter	to the following:						
		Brian R. Luna							
			Name of Person						
			Firm/Company						
		611 Magnolia St.							
		Dunedin FL, 34698-7719	Address						
		operations@ase-djs.com	City/State and Zip Code						
		E-mail address: (to be used for future annual report notif	ication)					
For furthe	er information c	oncerning this matter, please ca	ali:						
Brian R.	Luna		727 776-7051 at () _						
	Name o	f Person	Arca Code Daytime	: Telephone Number					
Enclosed	is a check for the	ne following amount:							
□ \$25.0	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:

TO:

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 ARTICLES OF ORGANIZATION **OF**

Luna Airport Shuttle LLC

2019 APR 15 PH 2:53

(Name of the Limited Liability Company as it now appears on our r (A Florida Limited Liability Company)	ecords.)		
U' = 0	$\cdot = \left(\frac{1}{2}, \frac{1}{6} \right)^{\frac{1}{2}}$		
The Articles of Organization for this Limited Liability Company were filed on 6-9-2003	and assigned		
Florida document number L03000020702			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company here:			
Luna Enterprises LLC			
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)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	· · ·		
B. If amending the registered agent and/or registered office address on our rec	cords, enter the name of the nev		
registered agent and/or the new registered office address here:			
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		
			☐ Add		
			☐ Remove		
			□ Change		
			Add		
			□ Remove		
			Change		
			Remove		
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E. Effective date, if other than t (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	must be specific and cannot be prior to block does not meet the applicab	date of filing or more than 90 days at	tional) or filing.) Pursuant to 605.0207 (3)(b) his date will not be listed as the
If the record specifies a delay (b) The 90th day after the r	red effective date, but not a ecord is filed.	an effective time, at 12:01	a.m. on the earlier of:
Dated April 4	2019	_	
	DA!		· /
	Signature of a member or authoriz		47

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00