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## **COVER LETTER**

TO: Registration S Division of Co				
Dion Avia	tion, LLC			
30113ECT.	Name of Lim	ited Liability Company		
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Suzanne D Banks			
		Name of Person		
	Dion Aviation, LLC			
	-	Firm/Company	<del></del>	
	2226 Harris Ave #2			
		Address		
	Key West, FL 33040			
	•	City/State and Zip Code		
	sbanks@subamanagement.c			
For further information	E-mail address: ( concerning this matter, please c	to be used for future annual report notificationall:	n)	
Joanne Beeman		305 602-7706		TARY
	of Person	Area Code Daytime Tele	phone Number $\frac{\pi}{2}$	of STATI
Enclosed is a check for	the following amount:			5
<b>■</b> \$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)	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dion Aviation, 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  $\frac{07/08/2003}{2}$ and assigned Florida document number L03000025795 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) 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 records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address . Florida \_\_\_

#### 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.

Cirv

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
VP. Secet	Dr Scott J Loessin	2226 Harris Ave, #2	
		Key West, Fl. 33040	≅ Remove
			□ Change
		<del></del>	□Remove
			□ Change
		<del></del>	□Adid
			□Remove
			🗀 Change
			□Remove
		<del></del>	Change
			□Add
			☐Remove
			Change
			□Add
		<del></del>	□Remove
			□Change

## Page 2 of 3

	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	REMOVE:
	DR Scott J LOESSIN VP, SEC.
	2-226 HARRIS AVE #2
	2-226 HAMMIS AVE #Z KEY WEST, FL 330 to
	<del></del>
	· · · · · · · · · · · · · · · · · · ·
f an effecti <u>Note:</u> If t	e date, if other than the date of filing:  tive 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 605.6 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed it's effective date on the Department of State's records.
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlied Oth day after the record is filed.
Oated 03/	3/20/2020
	Signature of a member or authorized representative of a member
	\ Signature of a member or authorized representative of a member
	)