L040000 40590

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
· · · · · · · · · · · · · · · · · · ·
Certified Copies Certificates of Status
- Octanious of Status
Special Instructions to Filing Officer:

Office Use Only



000109603420

09/19/07--01030--010 **25.00

n7 SEP 27 PH 3: 17



33321VED 07 SEP 27 AM 10: 15

SECRETALLA OF STATE TALLAHASSEE, FLORIDA

September 20, 2007

JERRY L BENNETT PROVIDER RESOURCES LLC P O BOX 60623 PALM BAY, FL 32906-0623

SUBJECT: AVIATION AVENUE LLC Ref. Number: L04000040590

We have received your document for AVIATION AVENUE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Document Specialist
Registration/Qualification Section

Letter Number: 407A00055499

COVER LETTER

	stration Section sion of Corporations			
	AVIATION	AVENUE LLC		
SUBJECT:	(Name of L	mited Liability Company)		
The enclosed	Articles of Amendment and fee(s) are s	ubmitted for filing.		
Please return	all correspondence concerning this matt	er to the following:		
		Jerry L. Bennett		
		(Name of Person)	<u> </u>	
	Pro	vider Resources LLC		
		(Firm/Company)		-
		P O Box 60623		
			=	
	Pal	m Bay, Fl 32906-0623		
		(City/State and Zip Code)	-	
For further in	formation concerning this matter, please	call:		
	Jerry L. Bennett	321 698-4477		
*	(Name of Person)	(Area Code & Daytin	e Telephone Number)	
Enclosed is a c	heck for the following amount:			
\$25.00 Filis	•	S55.00 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

	AVIATION AVENUE LLC		
	(Present Name) (A Florida Limited Liability Company)		•
FIRST:	The Articles of Organization were filed on and assigned document numberL04000040590		
SECOND:	This amendment is submitted to amend the following:		
A P 44 Sa	the single member and the registered agent. The LLC will have a physical address of: 450 Avintion ve, Palm Bay, Fl 32907. Any mail should be sent to: Jerry L. Bennett % Provider Resources LLC O Box 60623, Palm Bay, Fl 32906-0623. The phone number to reach Jerry L. Bennett is (321) 698-477. andra D. Bennett will have no further obligation or responsibility for the LLC or it's conduct of business fective with the filling and acceptance of this amendment.		
		07 SEP 27	
Dated	September 14, 2007.	7 PH 3: 17	
	Signature of a member or authorized representative of a member		·
	Jerry L. Bennett		
	Typed or printed name of signee		

Filing Fee: \$25.00

September 26, 2007

Sub; Letter # 407A00055499 Aviation Avenue LLC

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.

Jerry L. Bennett

07 SEP 27 PM 3: 17