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	Registration Se Division of Co		,	•
SUBJEC	· • ·	urg Jet Center, LLC		
SOBJEC		Name of Lin	ited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please ret	urn all correspo	ondence concerning this matter	to the following:	
		Dena Auletto		
			Name of Person	
		Saavedra-Goodwin		
			Firm/Company	
		312 S.E. 17th Street, 2nd I	Floor	
			Address	
		Fort Lauderdale, FL 33310	5	
			City/State and Zip Code	-
		dauletto@saavlaw.com		
For furthe	r information c	oncerning this matter, please c	to be used for future annual report no all:	tification)
Dena Aul	etto		954 767-6333	
	Name o	l'Person		ne Telephone Number
Enclosed i	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)
	<u>dailing Addres</u> Registration S		<u>Street Address:</u> Registration Sc	ection
I.	Division of C	orporations	Division of Co	rporations
	P.O. Box 632 Tallahassee, I		The Centre of 2415 N. Monre	Tallahassee pe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

3

St. Petersburg Jet Center, LLC			22		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on o Liability Company)	ur records.)	2020 AUG	-17	
The Articles of Organization for this Limited Liability Company Florida document number L04000085554			G-gand assign		
This amendment is submitted to amend the following:			0	,	
A. If amending name, enter the new name of the limited lia	bility company here:		v- 2"		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designal	ion "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 agent and/or the new registered office address here: Name of New Registered Agent:	address on our record	s, <u>enter the na</u>	me of the new ro	gistered	
New Registered Office Address:					
New Registered Office Address.	Enter Florida stre	ret address			
	Cuy		Zip Code		
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>				
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my di provided for in Chapte	uties, and Lan er 605, F.S. O	, i familiar with a r, if this docume	nd	

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
COO/S	Warren D. Kroeppel	4860 N.E. 12th Avenue	Add
		Fort Lauderdale, FL 33334	≣ Remove
			□ Change
			Add
			Remove
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record spe	rifics a delayed effective d	ate, but not a	an effective ti	me, at 12:01 a.	n. on the earlie	er of: (b) The	90th day after the
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Filing Fee: \$25.00