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B. BOSTICK
OCT 1 5 2012
EXAMINER

COVER LETTER

TO:	Registration Sect Division of Corpo							
SUB.ii	SUBJECT: Sunbelt Aviation, LLC							
Name of Limited Liability Company								
The en	closed Articles of A	mendment and fee(s) are sul	omitted for filing.					
Please	return all correspond	dence concerning this matter	to the following:					
			Erin Meyer					
Name of Person								
Advocate Consulting Legal Group, PLLC								
Firm/Company								
	3073 Horseshoe Dr S Ste 210							
	Address							
Naples, FL 34104							•	
	City/State and Zip Code							
rachelh@advocatetax.com E-mail address: (to be used for future annual report notification)								
For fur	ther information con	acerning this matter, please of	•		,	TÄLLÄHÄSSI	12 OC	l teny
	Ra	chel Hali	at (239)	213-	-0066	ASS		#Minus # Minus H i
	Name of F	Person		Daytime Tele	phone Number		12 OCT 2 PH 4:	A STORE
Enclos	ed is a check for the	following amount:				Lozio		St. week
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	nclosed)	\$60.00 Filir Certificate Certified ((additiona	ng Fee,		l)

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

Sunbeli (Name of the Limited Liability C (A Florida Lin	t Aviation, LLC Company as it now appear: nited Liability Company)	s on our records.)				
The Articles of Organization for this Limited Liability Cor Florida document number L0500002617	mpany were filed on	12/30/2004	and assig	ned		
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limite	ed liability company here	2:				
The new name must be distinguishable and end with the words 'L.L.C."	"Limited Liability Compar	ny," the designation	"LLC" or the ab	breviation		
Enter new principal offices address, if applicable:	•		B -			
Principal office address MUST BE A STREET ADDRE			1 9	E H ^o g ¹		
Enter new mailing address, if applicable:			T 12 PM 4: 15	enterior		
(Mailing address MAY BE A POST OFFICE BOX)	- 10		[0]	*HEQU		
			5			
B. If amending the registered agent and/or register registered agent and/or the new registered office addre		ur records, <u>enter</u>	the name of	the new		
Name of New Registered Agent:		····				
New Registered Office Address:	Fut	er Florida street ac	ldrass			
	City	, Florida _	, Florida 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 or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Title Name **Address** Type of Action GRANOWICZ, DONALD E MGRM 1220 APOLLO BEACH BOULEVARD √ Remove APOLLO BEACH FL 33572 MGRM GRANOWICZ, VIC F 1811 E. 5TH AVE. ✓ Remove TAMPA FL 33605 MGRM Donovic Consulting, LLC 1220 APOLLO BEACH BOULEVARD _ ✓ Add Remove APOLLO BEACH FL 33572 Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Vic F. Granowicz, Member of Donovic Consulting, LLC, Member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00