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TALLAHASSEE, FLORINA

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DEC 14 2012

EXAMINER

COVER LETTER

Registration Section **Division of Corporations**

SUBJECT:

Sunbelt Aviation, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Vic Granowicz

Name of Person

Sunbelt Aviation, LLC

Firm/Company

1220 Apollo Beach Blvd.

Address

Apollo Beach, FI 33572

City/State and Zip Code

vicg1@mac.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vic Granowicz

 $at \, (\underbrace{813) \, 995\text{-}1172}_{\text{Area Code \& Daytime Telephone Number}}$

Name of Person

Enclosed is a check for the following amount:

- \$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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sunbe	elt Aviation, LLC		
(Name of the Limited Liabi	lity Company as it now appear la Limited Liability Company)	ars on our records.)	
(****	u Dilliou Buomiy Company)		
The Articles of Organization for this Limited Liability	y Company were filed on	12/30/2004	and assigned
Florida document numberL0500002617	·		
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the l	imited liability company he	ere:	**1 N
The new name must be distinguishable and end with the	words "Limited Liability Comp	pany," the designation "I	2012 Brithe appreviation
"L.L.C."			
Enter new principal offices address, if applicable:		•	mo _ r
(Principal office address MUST BE A STREET AD	DRESS)	, , , , , , , , , , , , , , , , , , ,	FS
		,	F STATE 26
			\$4 .
Enter new mailing address, if applicable:	·	_	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or re	L.F	our records, enter	the name of the new
registered agent and/or the new registered office a	<u>aaress nere</u> :		
N			
Name of New Registered Agent:			
New Registered Office Address:			
	E	Inter Florida street add	iress
<u> </u>		, 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 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 = Ma MGRM = N	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Granowicz, Donald E.	1321 Jumana Loop	Add ·
		Apollo Beach, Fl 33572	Remove
-		•	<u>.</u>
MGRM	Granowicz, Vic	1811 E. 5th Avenue	
		Tampa, Fl 33605	Remove
MGRM	Donovic Consulting, LLC	1220 Apollo Beach Blvd	Add
		Apollo Beach, Fl 33572	Remove
			Add Remove
			Add Remove

). If ame	ending any other information,	enter change(s) here: (Attach a	additional sheets, if necessary.)		
-			·		
-					
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-		······································			
ited	December 6	2012	:		
-		0//			
	Signature of a member or authorized representative of a member				
	Vic Granowicz MGRM				
	Typed or printed name of signee				

Page 3 of 3

Filing Fee: \$25.00

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