

105000023370

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(Address)

(City/State/Zip/Phone #)

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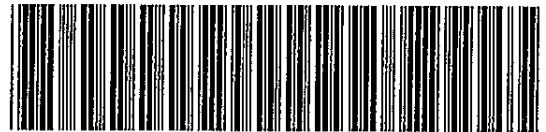
(Business Entity Name)

(Document Number)

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105-23370  
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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** AVIATION ALLIANCE, 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:

Robert C. Owens  
(Name of Person)

Robert C. Owens, P.A.  
(Firm/Company)

6630 SW 50th Terrace  
(Address)

Miami, FL 33155  
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert C. Owens at ( 305 ) 669-9263  
(Name of Person) (Area Code & Daytime Telephone Number)

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)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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

AVIATION ALLIANCE, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on March 8, 2005 and assigned document number L05000023370.

**SECOND:** The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

Article I is amended to read:

The name of the Limited Liability Company is:

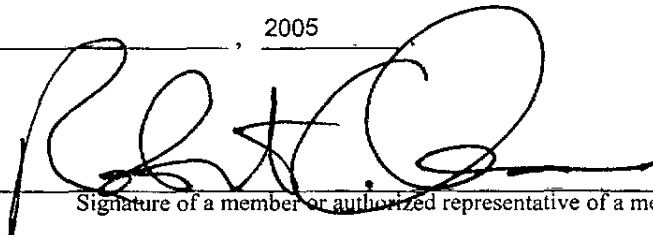
AVION ALLIANCE, LLC

Article V is amended to read:

The name and address of the managing member is:

Title: Chief Executive Manager  
RUODOLFO J. DOMINGUEZ  
5600 N.W. 36th Street, Suite 513  
Miami, FL 33142

Dated April 4, 2005



Signature of a member or authorized representative of a member

Robert C. Owens, Authorized Representative of Member

Typed or printed name of signee

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Filing Fee: \$25.00