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| r's Name) |
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Office Use Only

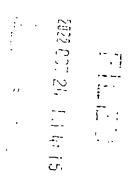
A. RIVERS

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COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| Division of Corporations Dispect: Rad mark A viation LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. The enclosed Articles of Amendment and fee(s) are submitted for filing. The ease return all correspondence concerning this matter to the following: The firm/Company T |
| The enclosed Articles of Amendment and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Division of Corporations SUBJECT: Rad mark Allation 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: **Lonstanding Patzanakidis** Firm/Company 15854 Bent Cack Ro Address Welling to Fl. 334/4 City/State and Zip Code Patrice Company For further information concerning this matter, please call: **Lonstanding Patzanakidis** Lonstanding Patzanakidis** at (State) S43-6307 Daytine Telephone Number Enclosed is a check for the following amount: \$\frac{1}{2}\$ \$25.00 Filing Fee \$\bigcircles \frac{1}{2}\$ \$30.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate Copy is enclosed) **Certificate of Status & Certificate Copy is enclosed)** |
| Firm/Company |
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| Dontus Ocomcast, net |
| For further information concerning this matter, please call: |
| Konstandinos Patzanakidis a (SIGL) 543-6307 |
| Name of Person ———————————————————————————————————— |
| Enclosed is a check for the following amount: |
| Certificate of Status Certified Copy Certificate of Status & Cadditional copy is enclosed) Certified Copy |
| |

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

| Rodmark Aviat | -ion LLC | |
|---|--|---------------------------------------|
| (A Florida Limited Li | ability Company) | |
| The Articles of Organization for this Limited Liability Company v Florida document number <u>L0500097434</u> . | vere filed on 10/3/05 | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liabil | ity company here: | |
| 1110 | | |
| The new name must be distinguishable and contain the words "Limited Liabilit | y Company," the designation "LLC" or the | abbreviation "L.L.C." |
| This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "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 address on our records, enter the name of the new registered | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | NA | |
| B. If amending the registered agent and/or registered office ac agent and/or the new registered office address here: | idress on our records, enter the n | ame of the new registere |
| Name of New Registered Agent: Name | | ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ |
| New Registered Office Address: | Entar Florida street address | 2 |
| | | |
| - | | . Zip Code |
| New Registered Agent's Signature, if changing Registered Agent: | | 7 " |

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 605, 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 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 |
|--------------|-------------|---------------------|----------------|
| <u>amBR</u> | Debra Moser | 15854 Bent Creek Rd | Add |
| | | Wellington, F/33414 | □ Remove |
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| an effective da ote: If the d | te, if other than the date of filing: 735/302 (optional) ate is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lis ffective date on the Department of State's records. | 5.0207 ted as |
| | fies a delayed effective date, but not an effective time, at 12:0) a.m. on the earlier of: (b) The 90th day after | er the |
| is filed. ated $\frac{7}{2}$ | 15/2022 2027 | |
| _ | Signature of a member or authorized representative of a member | |
| | ~ / // · | |