L06000051965

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #	·)			
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08 JUN -2 PM 4: 22

SECRETARY OF STATE
-DIVISION OF CORPORATION

J. BRYAN

JUN - 3 2008

EXAMINER

COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT: SDE AV	viation LLC			
<u> </u>	(Name of Limi	ited Liability Company)		_
	Amendment and fee(s) are substance concerning this matter			
	Edward Mancini			
		(Name of Person)		
	SDE Aviation LLC			
		(Firm/Company)		
	6850 Nineteen Mile Road	I		<u>e</u> 22
	-	(Address)		IF 8
	Sterling Heights, MI 483	14		N-N
		(City/State and Zip Code)		P P
For further information of	oncerning this matter, please ca	all:		NY ISION OF CORPORATIONS 08 JUN - 2 PH 4: 22
Edward Mancini		at (586) 685-1000		13 TS
(Name	of Person)	(Area Code & Daytime T	'elephone Number)	
Enclosed is a check for the	ne following amount:			
2 \$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 Stat Certified Copy (additional copy i	

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

DIVISION OF CORPORATIONS

OB JUN -2 PH 4: 22

SDE Aviation LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liabili	ity Company were filed on May 11, 2006	and assigned
Florida document number L06000051965	·	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the des	ignation "LLC" or the abbreviation
Enter new principal offices address, if applicable	•	
(Principal office address MUST BE A STREET A	DDRESS)	
		·····
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
B. If amending the registered agent and/or r registered agent and/or the new registered office	•	s, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida	street address)
_		lorida
	(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 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

Type of Action Title <u>Name</u> Address MGR Daniel C. Mancini 7 Add 3100 SW 15th Street Remove Deerfield Beach, FL 33442 Steven M. Mancini MGR 6850 Nineteen Mile Road **m**✓ Add Sterling Heights, MI 48314 Remove 🗖 Add Remove **□** Add Remove 🗖 Add Remove □ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated May 30 2008 Signature of a member or authorized representative of a member Edward Mancini Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00