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SECRETARY OF STATE
TALLAMASSES FLORIO

COVER LETTER

TO: Registration Section Division of Corporation	on ations						
SUBJECT: Air King LLC							
SUBJECT:		ed Liability Company)					
The enclosed Articles of Amendment and fee(s) are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
ı	Michael Matheny						
•		(Name of Person)					
	Air King LLC						
•	THI THIS LEO	(Firm/Company)					
3172 Starbright Ct.							
		(Address)					
Middleburg, Florida 32068							
(City/State and Zip Code)							
For further information concerning this matter, please call:							
Michael Matheny		at (904) 759-1358					
(Name of P	erson)	(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)				

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

Air King LLC		
(Name of the Limited Lia (A Fig.	ability Company as it now appears on our orida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liabil	lity Company were filed on July 27,20	and assigned
Florida document number <u>L06000074602</u>	 .	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and end with th "L.L.C."	ne words "Limited Liability Company," the	designation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office		ords, enter the name of the new
Name of New Registered Agent:	**	
New Registered Office Address:	(France Flor	rida street address)
	(Estier Fiol	·
-	(City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Regi	stered Agent:	
l hereby accept the appointment as registered ag the provisions of all statutes relative to the prop accept the obligations of my position as register being filed to merely reflect a change in the regi company has been notified in writing of this cha	er and complete performance of my d red agent as provided for in Chapter 6 istered office address, I hereby confiri	uties, and I am familiar with and 108, F.S. Or, if this document is n that the limited liability
		HAY -2 RETARN AHASSI

Page 1 of 2

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>Mgr</u>	Joseph L. Haynes	1800 Lago Del Sur Middleburg, Florida 32068	Add Remove
<u>Mgr</u>	Winceslao B. Desuyo	2157 Figaro Ln. Jacksonville, Florida 32210 Mgr	Add Remove
<u>Mgr</u>	Samuel B. Desuyo Jr.	3171 Starbright, Ct. Middleburg, Florida 32068	Add Remove
			Add Remove
			AddRemove
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Add Remove
D. If ame	ending any other information, enter char	ge(s) here: (Attach additional sheets, if necess	ary.)
-			
			
Dated Ma	ay 1, 2008 ,		20 TA:
	Signature of a memb	er or authorized representative of a member	ZOOB MAY
	Michael Matheny	esperance appropriate and the second	17A-2
	Турс	ed or printed name of signee Page 2 of 2	me m
		Filing Fee: \$25.00	