

L060000106664

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600275217196

07/21/15--01010--019 **120.00

2015 JUL 21 P 12:07
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

JUL 22 2015

S MASON

COVER LETTER

**TO: Registration Section
Division of Corporations**

AVIOR AIRLINES SERVICES, LLC

SUBJECT: _____
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:

Luis Suarez

Name of Person

Firm/Company

7500 Nw 25th St unit 1A

Address

Miami Florida 33122

City/State and Zip Code

henriquezm@avior.com.ve

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

For further information concerning this matter, please call:

Luis Suarez

305 4702203

at (_____) _____

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)

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

FILED
2015 JUN 21 P 12:07
REGISTERED AGENT
CLERK OF STATE
JULIE E. HARRIS

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	LUIS SUAREZ	7500 NW 25TH ST UNIT 1A	☐ Add
		MIAMI FL 33122	☒ Remove
			☐ Change
Manager	LUIS A SUAREZ M	7500 NW 25TH ST UNIT 1A	☒ Add
		MIAMI FL 33122	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

FILED
2015 JUL 21 P 12:07
CLERK OF DISTRICT COURT
1000 STATE STREET
TALLAHASSEE, FL 32304

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated JULY 13TH 2015

Signature of a member or authorized representative of a member

LUIS SUAREZ

Typed or printed name of signee

FILED
2015 JUL 21 PM 12:07
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA