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J. BRYAN

JUN 2 4 2008

EXAMINER

COVER LETTER

TO: Registration So Division of Cor				
SUBJECT: 3 GEN	AVION TRADING, L	LC		Ð
•	(Name of Lim	ited Liability Company)		_
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondence	ondence concerning this matter	to the following:		DIVISION 23 PH 2: 24
	JEANNIE MURPHY			皇器
		(Name of Person)		る際
MARING BOOKKEEPING SERVICE, INC.				3 PF
(Firm/Company)				7. 部
				24 P.S.
5795 ORANGE DRIVE				
		(Address)		
	DAVIE, FLORIDA 33314			
		(City/State and Zip Code)		
For further information of	concerning this matter, please c	all:		
JEANNIE MURPHY		at (954) 792-5075		
(Name of Person)		(Area Code & Daytime Telephone Number)		
Enclosed is a check for t	he 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 6	
MAILING ADDRESS: Registration Section		STREET/COURIER Registration Section	ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3 GEN AVION TRADING, 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 Liability Company were filed on JUNE 16, 2008 and assigned Florida document number L07000021522 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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.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 agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address) , Florida (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 Changing Registered Agent, Signature of New Registered Agent)

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 Title Title **Type of Action** Name | <u>Address</u> MGR RACHEL AUTRY 3951 S W 100TH TERRACE ■7 Add DAVIE, FLORIDA 33328 Remove Remove Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00