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## **COVER LETTER**

Division of Co					
<sub>SUBJECT:</sub> Black J	let, LLC			<b></b>	
		ited Liability Company)		_	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspondence	ondence concerning this matter	to the following:			
	Jason Brownell	AL CD			
		(Name of Person)	•		
	Black Jet, LLC				
		(Firm/Company)			
	1901 N. Ocean Blvd, Sui	ite 9-C			
		(Address)		met to 7	
	Fort Lauderdale, FL 333	05		SE SE	
•	<u> </u>	(City/State and Zip Code)			
- For further information of	concerning this matter, please c	all:		SECRETARY OF STATE	
	,				
Jason Brownell	of Person)	at ( 435 ) 659-1006 (Area Code & Daytime T	elephone Number		
(Name	or reason)	(Area code & Daytine F	elephone Number	*150	
Enclosed is a check for t	he following amount:				
2 \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	
Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Black Jet, LLC			
( <u>Name of the Limited Li</u> (A F)	ability Compan orida Limited Li	y as it now appears on our records. ability Company)	)
The Articles of Organization for this Limited Liab	ility Company	were filed on 7/25/2007	and assigned
Florida document number L07000076581			
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of the	ne limited liabi	lity company here:	
The new name must be distinguishable and end with to "L.L.C."	he words "Limit	ed Liability Company," the designation	
E.E.C.			EN SE
Enter new principal offices address, if applicab	le:	1901 N. Ocean Blvd, Suite 9-C	
(Principal office address MUST BE A STREET A	<u>ADDRESS)</u>	Fort Lauderdale, FL 33305	500 -0
-			
-			
Enter new mailing address, if applicable:		1901 N. Ocean Blvd, Suite 9-C	
(Mailing address MAY BE A POST OFFICE BO	<u>)X)</u>	Fort Lauderdale, FL 33305	Sin 4
B. If amending the registered agent and/or registered agent and/or the new registered offic			er the name of the new
Name of New Registered Agent:			
New Registered Office Address:	1901 N. Ocean	n Blvd, Suite 9-C	
		(Enter Florida street	t address)
ı	Fort Lauderdale	e, Florida	33305
•		(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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = N MGRM =	Manager = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Remove
			Add
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		<b>沙</b> (4)	<b>-</b> 살:
D. If amo	ending any other information, enter change(s)	here: (Attach additional sheets, if necessary)	5 mg/h
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Dated Aug	gust 27 , 2008	·	
		7	
		nuthorized representative of a member	
	Jason C Brownell Typed or p	rinted name of signee	- 12 12 12 12 12 12 12 12 12 12 12 12 12

Page 2 of 2

Filing Fee: \$25.00