## 107000126642

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
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S. WARREN DEC 1 9 2017

## **COVER LETTER**

TO:	Registration Sec Division of Corp							
er:::::1172		ROUP LLC						
SUBJEC	Name of Limited Liability Company							
The encl	losed Articles of a	Amendment and fee(s) are sub	mitted for filing.					
Please re	eturn all correspoi	ndence concerning this matter	to the following:					
		IVAN A GUERRERO ESO	Ó					
			Name of Person					
		IVAN A GUERRERO LLO	S					
			Firm/Company					
	28 W FLAGLER STREET STE 555							
			Address					
		MIAMI, FL 33130						
			City/State and Zip Code					
		ivan@ivanguerrerolaw.com	to be used for future annual report notific	ation)				
For furth	ner information ec	oncerning this matter, please ca	·	,				
IVAN A	GUERRERO		786 536-9088 at () Area Code Daytime T					
	Name of	Person	Area Code Daytime T	Telephone Number				
Enclosed	d is a check for th	e following amount:						
□ \$25.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				

MAILING ADDRESS:

TO:

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

ABA AIR GROUP, 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  $\frac{12/21/2007}{1}$ and assigned Florida document number <u>L07000126642</u> 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 contain 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 City

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 605, 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 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>	Address	Type of Action
AMBR	ECHOO AVIATION LLC	10171 NW 58TH STREET UNIT 9	<b>∃</b> Add
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ffective date, if other than the data meffective date is listed, the date must be lote: If the date inserted in this block ocument's effective date on the Department of the specifies and elayed of the 90th day after the record	ne specific and can't does not meet wartment of State	nnot be prior to date et the applicable s le's records.	tatutory filing re	equirements, this	filing.) Pursi s date will n	ot be listed:
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SILVIA QUIROGA FOR	ECHOO AVIA	ATION LLC				
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						2: 07
		Page 3 of	3			-

Filing Fee: \$25.00