L08000111055

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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

AEROSTAR TRAINING SERVICES, LLC

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:

ROYCE M. JONES

Name of Person

AEROSTAR TRAINING SERVICES, LLC

Firm/Company

169 MAGNOLIA WAY

Address

TEQUESTA, FLORIDA 33469

City/State and Zip Code

royce.jones@aerostartyperatings.com

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

For further information concerning this matter, please call:

Royce M. Jones

561 376-4946

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limite	d Liability Compa A Florida Limited I	iny as it now appears on our rec Ciability Company)	cords.)
The Articles of Organization for this Limited I Florida document number <u>L08000111055</u>		were filed on 12/04/2008	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	oility company here:	
Not Applicable			
The new name must be distinguishable and end w "L.L.C."	ith the words "Limi	ited Liability Company," the desi	gnation "LLC" or the abbreviation
Enter new principal offices address, if appli	cable:	Not Applicable	
(Principal office address MUST BE A STRE.	ET ADDRESS)		
			28 FALL SE
Enter new mailing address, if applicable:		Not Applicable	13FEB
(Mailing address MAY BE A POST OFFICE			
B. If amending the registered agent and registered agent and/or the new registered of	/or registered of office address her	ffice address on our records	enter the name of the new
Name of New Registered Agent:	Not Applica	able	
New Registered Office Address:	Not Applica	able	
		Enter Florida s	street address
		7	orida
		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, enter the title, name, and address of each Manager of Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Royce M. Jones	169 Magnolia Way	Add
		Tequesta, Florida	Remove
		33469	
MGRM	David T. Santo	169 Magnolia Way	Add
		Tequesta, Florida	Remove
		33469	
MGR	Aerostar Management Services, LLC	169 Magnolia Way	Add
		Tequesta, Florida	Remove
		33469	SEGRETA LLAHAS
			SS FF O Add
			Remove
			<i>*</i>
			Add
			Remove
			Add
			Remove
			<u></u>

امؤ	ease correct to original MGR as listed for this LLC previously. (Listed correctly on this submission).				
T	nank you.				
_{ed} Fe	bruary 12th 2013				
	Signature of a member or authorized representative of a member				
	Signature of a member or authorized representative of a member Royce M. Jones MGRM				

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Filing Fee: \$25.00

2013 FEB 18 AM II: 24
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