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T. CLINE AUG 29 2011 EXAMINER

COVER LETTER

Division of Co				•			
SUBJECT:	Landing Gea	r Technologie	s, LLC				
Name of Limited Liability Company						:	:
	•			:			
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.					
Please return all corresp	ondence concerning this matte	r to the following:					
		Eleida M Per	ez				
Name of Person							
Rica Holdings, LLC							
Firm/Company							
1094 Ali Baba Ave.							
Address							
Opa-Locka, Fl 33054 City/State and Zip Code							
				 	75 S		
eleida@landinggeartech.com E-mail address: (to be used for future annual report notification)						909	***
For further information	concerning this matter, please	call:			ASSEE, FI	3 26	en az est. gazibensten g g g
El	eida M Perez	at (305)	68	88-0550		垩	ا گاگ چستنس
Name	of Person	· Area	Code & Daytime To	elephone Number	70 86	20 100 100 100 100 100 100 100 100 100 1	The paper on a final section of the
Enclosed is a check for	the following amount:						
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing F Certified Cop (additional co		\$60.00 Filing Certificate Certified C (additional	of Status Copy		I)

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

Landir (<u>Name of the Limited I</u> (A	ng Gear Te Liability Compa Florida Limited	echnologies, L ny as it now appear Liability Company)	LC rs on our records.)		-	
The Articles of Organization for this Limited Lia Florida document number	•	y were filed on	01/08/2009	anc	d assigr	ned
This amendment is submitted to amend the follow	wing:					
A. If amending name, enter the new name of	the limited lial		<u>e</u> :			
The new name must be distinguishable and end with "L.L.C."	the words "Lim	ited Liability Compa	nny," the designation	"LLC" or	the abb	reviation
Enter new principal offices address, if applica	ble:	N/A			M.C.	
(Principal office address MUST BE A STREET	<u> (ADDRESS)</u>					**************************************
Enter new mailing address, if applicable:		N/A		1.3388 16 Att	26	
(Mailing address MAY BE A POST OFFICE B			STATE	<u> </u>		
B. If amending the registered agent and/or registered agent and/or the new registered offi			our records, <u>enter</u>	the nan	1e of 1	the new
Name of New Registered Agent:	N/A	· · · · · · · · · · · · · · · · · · ·				
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 = M	lanaging Member		
<u>Title</u>	Name	Address	Type of Action
MGRM	Eleida M Perez	1094 Ali Baba Ave. Opa-Locka, Fl 33054	Add Remove
MGR_	Eleida M Perez	1094 Ali Baba Ave. Opa-Locka, Fl 33054	✓ Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter o	change(s) here: (Attach additional sheets, if necessar	y.)
			
 Dated		. /	
	Signature of a m	les Dust grant gra	
		Eleida M Perez Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00