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| (Re | questor's Name) | <u> </u> |
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY SEE FLORIDA

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COVER LETTER

| TO: Registration S Division of Co | | g V V W | 44 |
|-----------------------------------|--|--|--|
| SUBJECT: | Aero T | ouchups, LLC | · |
| | Name of Limi | ted Liability Company | |
| The enclosed Articles o | f Amendment and fee(s) are sub | omitted for filing. | |
| Please return all corresp | condence concerning this matter | to the following: | |
| | | Debra A. Bryan | |
| | | Name of Person | |
| | DEB-CO, LLC | | |
| | | Firm/Company | |
| | | 645 Hanover Dr. | |
| | | Address | |
| | | Titusville, FL 32780 | |
| | | City/State and Zip Code | |
| | dbry E-mail address: (1 | an@aerotouchups.com to be used for future annual report notific | ation) |
| For further information | concerning this matter, please c | all: | |
| * | Don Delap | at (321)5 | 591-1990 |
| Name | of Person | at (321) 5 Area Code & Daytime | Telephone Number |
| Enclosed is a check for | the following amount: | | |
| \$25.00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | S55.00 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 3, 2012

DEBRA A. BRYAN 645 HANOVER DRIVE TITUSVILLE, FL 32780

SUBJECT: DEB-CO, LLC Ref. Number: W12000024488

We have received your document for DEB-CO, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." andthe word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 512A00013351

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

12 MAY -4 PM 12: 36

| | · - |
|--|---------------------|
| | SECRETARY OF STATE |
| AERO TOUCHUPS, LLC | TALLAHASSEE, FLORID |
| (Name of the Limited Liability Company as it now appears | |
| (A Florida Limited Liability Company) | |
| | |

| The Articles of Organization for this | Limited Liability Compa | any were filed on | 04/13/2009 | and assigned |
|--|---------------------------|------------------------|-----------------------------|--------------------------|
| Florida document numberL | 09000035278 | | | |
| This amendment is submitted to ame | end the following: | | | |
| A. If amending name, enter the n | ew name of the limited l | iability company her | re: | |
| | DEB-CO ENT | ERPRISES, LLC | | |
| The new name must be distinguishable "L.L.C." | and end with the words "L | imited Liability Compa | any," the designation "I | LLC" or the abbreviation |
| Enter new principal offices addres | s, if applicable: | | | |
| (Principal office address MUST BE | A STREET ADDRESS | <u> </u> | | |
| | | | | |
| Enter new mailing address, if appl | icable: | P.O. BOX 23 | 26 | |
| (Mailing address MAY BE A POST | | TITUSVILLE | , FL 32781-2326 | |
| B. If amending the registered a registered agent and/or the new re | | | our records, <u>enter t</u> | he name of the new |
| registered agent and/or the new re | gistered office address i | <u>iere</u> . | | |
| Name of New Registered A | agent: | | ··· | |
| New Registered Office Ad | iress: | | | |
| | | En | ter Florida street add | ress |
| | | | , 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 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>:

| <u>e</u> | <u>Name</u> | Address | Type of Action |
|--------------|---------------------------|--|---------------------------------------|
| <u> </u> | <u> </u> | | · · · · · · · · · · · · · · · · · · · |
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| | | | |
| | rtiolo III | enter change(s) here: (Attach additional she | |
| T | he purpose for which this | Limited Liability Company is organize | ed is: ALLO |
| A | NY AND ALL LAWFULL | BUSINESS | FILL MASSE |
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| _ _ ed | 05/04 | ,2012 | ATE ADA |
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Filing Fee: \$25.00