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EXAMINER

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SECKETARY OF STATE

COVER LETTER

TO: Registration Sect Division of Corpo	ion prations		
SUBJECT:	Horizon A	eronautics, LLC.	
		ted Liability Company	The state of the s
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	
		Diego Contreras	·
		Name of Person	7A1
·	Hor	rizon Aeronautics, LLC.	9 OC
		Firm/Company	T2:
	152	295 SW 106 Lane #708	2009 OCT 22 PH 3: 1 SECRETARY OF STATION AND ANASSEE. FLORE
		Address	နှင့် မြို့ မြို့
		Miami, FL. 33196	공작 - 7
	-	City/State and Zip Code	
	Horizon	_Aeronautics@hotmail.com	
	·	to be used for future annual report notificat	10 n)
For further information cor	cerning this matter, please of	all:	
Diego	Contreras	at (786) 44	14-2141
Name of I	Person	Area Code & Daytime T	elephone 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)
Registrat Division P.O. Box	G ADDRESS: ion Section of Corporations 6327 see, FL 32314	STREET/COURIER Registration Section Division of Corporati Clifton Building 2661 Executive Cente	ons

Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Н	orizon Aero	nautics, LL	C.		
(Name of the Limited	Liability Compa Florida Limited	ny as it now ap Liability Compar	pears on our records.)		
The Articles of Organization for this Limited L Florida document number L0900009	• • •	y were filed on _	September 18, 2009	and assigned	
	· · · · · · · · · · · · · · · · · · ·				
This amendment is submitted to amend the foll	owing:				
A. If amending name, enter the new name o	f the limited liab	oility company	<u>here</u> :		
	N/A	Ą		20 FAL S	
The new name must be distinguishable and end wi "L.L.C."	th the words "Lim	ited Liability Co	mpany," the designation "Ll	LC Torthe abbreviation	
Enter new principal offices address, if applic	able:	N/A		122 155	
(Principal office address MUST BE A STREE	T ADDRESS)			CO R	
•				9. 6	
Enter new mailing address, if applicable:		N/A		> ' ' \	
(Mailing address MAY BE A POST OFFICE	BOX)				
B. If amending the registered agent and/ registered agent and/or the new registered or			n our records, enter th	e name of the new	
,					
Name of New Registered Agent:	N/A				
New Registered Office Address:	N/A				
		Enter Florida street address			
		N/A	, Florida	N/A	
		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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Act	<u>tion</u>
MGRM	Gabriel Viera	8131 SW 94th court Miami, FL 33173	Add Remove	
			Add Remove	
			Zelleve AREBOCT 22	7022
			Add Add Add Add Remove	
			Add Remove	
D. If amend	ding any other information, ent	er change(s) here: (Attach additional sheets, if necessary.)		
_			- 	
Dated	October 14th,	, 2009	_	
	Signature of	a member or authorized representative of a member		
		Diego Contreras Typed or printed name of signee		

Page 2 of 2

Filing Fee: \$25.00