## L09000110298

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SECRETARY OF STATE

C. LEWIS

APR 2 7 2010

EXAMINER

## **COVER LETTER**

то:	Registration Sect Division of Corpo			
SURIE	CT:	IJET A	VIATION, LLC	
			ted Liability Company	
The enc	closed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please r	eturn all correspon	dence concerning this matter	to the following:	
			SURESH TEWANI Name of Person	
		JET AVIATION, LLC Firm/Company		
1			41 NW 20TH STREET	
			4.4444	
City/State and Zip Code  raul@stigmawear.com  E-mail address: (to be used for future annual report notification)				tification)
For furt	her information co	ncerning this matter, please c	eall:	
SURESH TEWANI  Name of Person		at ( <u>305</u> ) Area Code & Dayti	324-4140 me Telephone Number	
Enclose	ed 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/COUR Registration Sect Division of Corp Clifton Building 2661 Executive (	orations	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2010 APR 26 PM 4: 27

IJET AVIATION, LLC

SECRETARY OF STATE
TALLAHASSEE. FLORIDA
(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 NOVEMBER 16, 2009 and assigned L09000110298 Florida document number \_\_\_ 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 end with 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 Zip Code City New Registered Agent's Signature, if changing Registered Agent:

If Changing Registered Agent, Signature of New 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 or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member Type of Action <u>Title</u> <u>Name</u> **Address** ANAND STEPHEN MR ☐ Add ☑ Remove 1741 NW 20 ST MIAMI, FL 33142 ☐ Add Remove ☐ Add ☐ Remove □ Add Remove Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) APRIL 22 2010 Dated \_ Signature of a member or authorized representative of a member SURESH TEWANI

Typed or printed name of signee

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Filing Fee: \$25.00