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2012 JUN -8 AM 9: 02

J. SAULSBERRY EXAMINER

JUN 11 2012

COVER LETTER

P.O. Box 6327

Tallahassee, FL 32314

TO:.	Registration S Division of Co						
SUBJE	CT:						
SODGE		Name of Lim	ited Liability Company				
		Amendment and fee(s) are sul	•				
	·	-	Myles Thomas				
	Name of Person				=		
Aerospa			ace and Asset Auctions LLC				
		Firm/Company			_		
	4489 36th Street						
	Address				•		
	Orlando, FL, 32811					2812 JUN	
	City/State and Zip Code						4:233: mg
		Wyles E-mail address: (s@ChaseAerospace.com to be used for future annual report notifica	ition)	CRETXRY OF LAHASSEE.F	တ	g g garana garana
For furt	ther information	concerning this matter, please of	call:		OF STA	AH 9:	-
		yles Thomas	ar (12-4545	76K	02	
	Name (of Person	Area Code & Daytime	relephone Numbe	er		
Enclose	ed is a check for t	the following amount:					
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Stat		sed)
MAILING ADDRESS: Registration Section Division of Corporations		ration Section	STREET/COURIE Registration Section Division of Corporat				

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Aerospace And Asset	t Auctions L	LC				
(Name of the Limited Liability Company a (A Florida Limited Liabi	s it now appears lity Company)	on our records.				
The Articles of Organization for this Limited Liability Company wer	e filed on	11/20/2009	and assign	ned		
Florida document numberL09000112093						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liability	company here	:				
CHASE AEROSPACE TRAD	ING DIVISIO	N LLC				
The new name must be distinguishable and end with the words "Limited I "L.L.C."	Liability Compan	y," the designation "	LLC" or the abb	previation		
Enter new principal offices address, if applicable:		 	주 <u>의 점</u>			
(Principal office address MUST BE A STREET ADDRESS)			2 JE			
_			HAS T	Marketon .		
			8 - 8 - 8 - 8 - 8 - 8 - 8 - 8 - 8 - 8 -	i Cari		
Enter new mailing address, if applicable:			<u> </u>	# 1 t		
(Mailing address MAY BE A POST OFFICE BOX)		, ,, , , , , , , , , , , , , , , , , ,	87 99 <u></u>			
						
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	address on ou	ur records, <u>enter</u>	the name of	the new		
Name of New Registered Agent:	•					
New Registered Office Address:						
	Enter Florida street address					
	, Florida					
C	ity		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 = N	Managing Member		
<u>Title</u>	Name	Address	Type of Action
	<u></u>		Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ding any other information, enter chang	AHAS SS SS	FILES: 2012 JUN -8 AM 5: 0 SEPRETARY OF STATE
Dated	6/6, 20,	12. MATA	02 FE
	Signature of a member	or authorized representative of a member	
	Typec	Myles Thomas d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00