L 10000000 2833

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TALLANASSEE, FLORII

J. BRYAN

OCT -1 2010

EXAMINER

COVER LETTER

TO: Registration Division of C				
SUBJECT:	Seaplane	es of Miami LLC.		
		ited Liability Company		
The enclosed Articles	of Amendment and fee(s) are sul	bmitted for filing.		
Please return all corres	pondence concerning this matter	r to the following:		
		Freddy Antolinez		
		Name of Person		
		Firm/Company		10g 3
and the second		• •	, ,	Civil Se T
	1497	70 nw 42nd ave suite 121 Address		FILL BRANCH SEELS
		Address		SEE
		Miami Florida 33054		30 PM 1: 06
		City/State and Zip Code		12 · 08
	info E-mail address: (o@seaplanemiami.com to be used for future annual report notific	ation)	7
For further information	n concerning this matter, please of	call:		
	nrique Permuy	att ;	33-8687	_
Nam	e of Person	Area Code & Daytime	l'elephone Number	
Enclosed is a check fo	r the following amount:		•	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing For Certificate of Certified Copy (additional copy)	Status &
Reg Divi P.O.	ILING ADDRESS: istration Section ision of Corporations Box 6327 ahassee, 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

S	Seaplanes of	Miami LLC.		
(Name of the Limited	l <mark>Liability Compa</mark> A Florida Limited I	ny as it now appear Liability Company)	rs on our records.	
The Articles of Organization for this Limited L Florida document numberL1000000	2833	were filed on	01/08/2010	Sandassigned FILED PM 1:06
This amendment is submitted to amend the foll	是 是 0			
A. If amending name, enter the new name o	f the limited liab	ility company her	<u>·e</u> :	i i
	Seaplane To			
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ited Liability Compa	my," the designation '	'LLC" or the abbreviation
Enter new principal offices address, if applicable:		14970 nw 42	nd ave suite 121	
(Principal office address MUST BE A STREET ADDRESS)		Miami Florida	a 33054	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	new mailing address, if applicable: ing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/registered agent and/or the new registered of Name of New Registered Agent: New Registered Office Address:		<u>·e</u> : 	our records, <u>enter</u> enter Florida street ac , Florida	ldress
		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 = Managing Member **Title Name** <u>Address</u> Type of Action ☐ Add Remove ☐ Add Remove ☐ Add Remove Add Remove ∏Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 27 Dated_ Signature of a member or authorized representative of a member Freddy Antolinez Typed or printed name of signee

Page 2 of 2
Filing Fee: \$25.00