1000004938

(Re	equestor's Name)			
·	•			
(Ad	ldress)			
(Address)				
(Cit	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Name	e)		
(Dc	ocument Number)	·····		
(50	ourners Humber,			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
	,			

Office Use Only

G. MCLEOD

JAN 22 2010

EXAMINER



600166273116

01/21/10--01012--011 **25.00

10 JAN 21 AH 11: 53

SECRETARY OF STATE DIVISION OF CORPORATION

COVER LETTER

TO: Registration Section Division of Corporation	* . 8		
SUBJECT: EXEC		ed Liability Company	
The enclosed Articles of Amendm	ent and fee(s) are sub	mitted for filing.	
Please return all correspondence c	oncerning this matter	to the following:	
والمرابية المرابية ا	Carlos	Quintana Name of Person	
	Exe	wtepir u	<u>-C</u>
	<u>5500</u>	E-Mich, gan	st #6108
	Orland	City/State and Zip Code	22
	E-mail address: (to	os o Executea i o be used for future annual report notifica	V, COM
For further information concerning	g this matter, please ca	all:	
Name of Person	untona	at (<u>467) 808 – 7</u> Area Code & Daytime 7	1012 Telephone Number
Name of Leison		Thea code w say mile	(Alephone Position)
Enclosed is a check for the follow	ing amount:		
\$25.00 Filing Fee \$30 C	.00 Filing Fee & ertificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

10 JAN 21 AMIL	
10 JAN 2 CORD STAIR	
10 JAN 21 AM 11:53	
cords.)	ecc

Zip Code

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on Javay 14, 2010 and assigned Florida document number 4 1 00000 0 49.38
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
Execute Air Wealth Solutions LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation of the company of the designation of the company of
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviati "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 no registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
Florida

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.

City

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 = Ma MGRM = N	nager Ianaging Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
<u></u>			Add Remove
**************************************			Add Remove
D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary	<i>),)</i>
Dated	, Contraction of the contraction	Lan	
	Carlo	er or authorized representative of a member S O O O O O O O O O O O O	

Page 2 of 2

Filing Fee: \$25.00