

L10000020069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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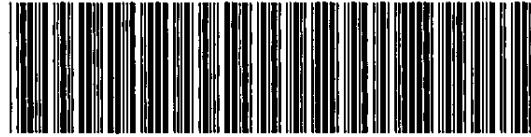
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: REEF FLYER, LLC**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**JAMES R. EDDY, ESQUIRE**  
Name of Person

**JAMES R. EDDY, P.A.**  
Firm/Company

**4800 BAYVIEW DRIVE, PENTHOUSE 5**  
Address

**FORT LAUDERDALE, FLORIDA 33308**  
City/State and Zip Code

**BEACHAVIATIONFL@GMAIL.COM**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**CHARLES BRADY** at ( **954** ) **600.0260**  
Name of Person Area Code & Daytime Telephone Number

Enclosed 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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

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12 AUG -3 PM 12: 29

REEF FLYER, LLC

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 02/22/2010 and assigned  
Florida document number L10000020069.

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)

C/O BEACH AVIATION, LLC

911 NE 10TH STREET

POMPANO BEACH, FL 33060

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4800 BAYVIEW DRIVE, PH 5

FORT LAUDERDALE, FL 33308

**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:

JAMES R. EDDY, ESQUIRE

New Registered Office Address:

4800 BAYVIEW DRIVE, PENTHOUSE 5

*Enter Florida street address*

FORT LAUDERDALE, Florida

33308

*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

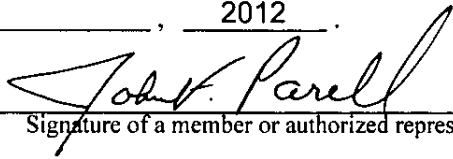
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	JOHN F. PARELL	3233 NE 31 AVENUE LIGHTHOUSE POINT FL 33064 US	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	JAMES R. EDDY	4800 BAYVIEW DRIVE PENTHOUSE 5 FORT LAUDERDALE, FL 33308	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated JULY 19, 2012



Signature of a member or authorized representative of a member

JOHN F. PARELL

Typed or printed name of signee