L100000 20662

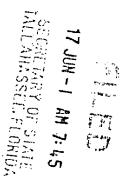
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COVER LETTER

TO: Registration Se Division of Cor		
	SLAND AVIATION, LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Articles of	Amendment and fee(s) are submitted for filing.	
Please return all correspo	ondence concerning this matter to the following:	
	Stuart Grossman	
	Name of Person	
	Levine Kellogg Lehman Schneider + Grossman LLP	
	Firm/Company	
	201 South Biscayne Boulevard, 22nd Floor	
	Address	
	Miami, FL 33131	
	City/State and Zip Code	
	sig@lklsg.com	
	E-mail address: (to be used for future annual report notification)	
For further information e	concerning this matter, please call:	
Stuart Grossman	305 403-8788	
Name o	of Person Area Code Daytime Telephone Number	
Enclosed is a check for the	the following amount:	
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee &	Status & y

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

GRAND ISLAND AVIATION, LLC		
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number L10000020662	pility Company were filed on 2-23-10	and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of the	he limited liability company here:	
The new name must be distinguishable and contain the word	ds "Limited Liability Company." the designation "LLC" or the a	hbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET.	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO		
Maning dudress MAT BE A FOST OF FICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter	the name of the new
Name of New Registered Agent:		JUN 1
		JS.
New Registered Office Address:	Enter Florida street address	39 3
	Florida	202
	City	Zip Coden

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 605, 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-Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Sarah Nilsen	201 South Biscayne Boulevard	
		22nd Floor	Remove
		Miami, FL 33131	Change
MGR	Edward Leevan	201 South Biscayne Boulevard	
		22nd Floor	■ Remove
		Miami, FL 33131	☐ Change
			□ Add
		***************************************	Remove
			☐ Change
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f an effe	ve date, if other than the date of filing: (option to date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after the date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after the day of filing or more than 90 days after the day of filing or more than 90 days after the day of filing or more than 90 days after the day of filing or more than 90 days after the day of filing or more than 90 days after the day of filing or more than 90 days after the day of filing or more than 90 days after the day of filing or more than 90 days after the day of filing or more than 90 days after the day of filing or more than 90 days after the day of filing or more than 90 days after the day of filing or more than 90 days after the day of filing or more than 90 days after the day of filing or more than 90 days after the day of filing or more than 90 days after the day of filing or more than 90 days after the day of filing or more than 90 days after the day of filing or more the day of filing or more than 90 days after the day of filing	filing.) Pursuant to 605	5.0207
	If the date inserted in this block does not meet the applicable statutory filing requirements, this ent's effective date on the Department of State's records.	date will not be list	eu as
	ord specifies a delayed effective date, but not an effective time, at 12:01 a 90th day after the record is filed.	.m. on the earli	er of
Dated	May 31 2017		
valeu .	411		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00