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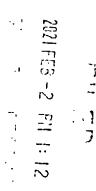
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## **COVER LETTER**

Registration Section

**Division of Corporations** 

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Enviro Aviation, LLC BJECT: Name of Limited Liability Company e enclosed Articles of Amendment and fee(s) are submitted for filing. ase return all correspondence concerning this matter to the following: Seth A. Joseph Name of Person Enviro Aviation, LLC Firm/Company 609 Riviera Isle Drive Address Fort Lauderdale, FL 33301 City/State and Zip Code saj@bellsouth.nct E-mail address: (to be used for future annual report notification) r further information concerning this matter, please call: mberly Ann Brown Davtime Telephone Number Name of Person closed is a check for the following amount: ] \$25.00 Filing Fee **\$30.00** Filing Fee & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Enviro Aviation, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) Articles of Organization for this Limited Liability Company were filed on March 31, 2010 and assigned ida document number  $\frac{1.10000035304}{}$ amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." er new principal offices address, if applicable: incipal office address MUST BE A STREET ADDRESS) ter new mailing address, if applicable: ailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new registered ent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address w Registered Agent's Signature, if changing Registered Agent: ereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the

ereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and cept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability mpany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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

R = Manager

BR = Authorized Member

<u>e</u>	Name	Address	Type of Action
.BR	Kimberly Ann Brown	609 Riviera Isle Drive	■Add
		Fort Lauderdale, FL 33301	□Remove
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amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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fective date, if other than the date of filing:	to 605.0207 (3 oc listed as th
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day is filed.	y after the
ned 1/26/21	
Signature of a member or authorized representative of a member	_ , ,
South A. Joseph	HE
Seth A. Joseph  Typed or printed name of signee	`