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(Requestor's Name)

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(City/State/Zip/Phone #)

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MAIL

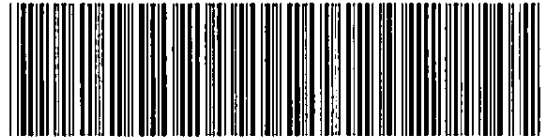
(Business Entity Name)

(Document Number)

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LAW OFFICE OF
**JURSINSKI
MURPHY**

Celebrating 40 Years in Southwest Florida

REAL ESTATE · BUSINESS · CONSTRUCTION

Florida Bar Board Certified Attorneys

February 27, 2024

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Kelly Air Systems, LLC
Articles of Amendment

Dear Sirs:

Enclosed please find the Articles of Amendment for a name change for Kelly Air Systems, LLC, along with check #9399 in the amount of \$25.00 reflecting the filing fee for the Articles of Amendment.

I have also enclosed a self-addressed envelope for the return of the filed articles.

Should you have any questions, please contact Lisa at my office.

Sincerely,

/s/ Kara Murphy

Kara Jursinski Murphy, LL.M., B.C.S.
(signed in absence to avoid delay)

KJM/lh

Enclosures

F:\LawOffice\Clients\Kelly, Ronald-Kelly Air\Kelly Air LLC - Articles of Amendment\ltr to Sec of State 02.27.2024.docx

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Kelly Air Systems, 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:

Kara Jursinski Murphy, Esq.

Name of Person

Law Office of Jursinski & Murphy, PLLC

Firm/Company

15701 S. Tamiami Trail

Address

Fort Myers, FL 33908

City/State and Zip Code

rkellycoach@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kara Jursinski Murphy, Esq.

239 337-1147
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Kelly Air Systems, LLC

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

The Articles of Organization for this Limited Liability Company were filed on May 6, 2010 and assigned
Florida document number L10000049006.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Ron Kelly, LLC

The new name must be distinguishable and contain 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)

330 NE 20th Street

Cape Coral, FL 33909

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

330 NE 20th Street

Cape Coral, FL 33909

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:

New Registered Office Address:

Enter Florida street address

Florida

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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Ronald D. Kelly	330 NE 20th Street	<input checked="" type="checkbox"/> Add
		Cape Coral, FL 33909	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
PRES	Ronald D. Kelly		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

2/20

2024

Signature of a member or authorized representative of a member

Ronald D. Kelly

Typed or printed name of signee

Filing Fee: \$25.00