L10000079182

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| Certified Copies | _ Certificates of | Status |
| Special Instructions to Filing Officer: | | |
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COVER LETTER

TO: Registration Section

Division of Corporations

Surject: Angels International Aviation

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 C. Gruen

Name of Person

Professional Air Resources

Firm/Company

1747 Orchardgrove Avenue

Address

New Port Richey, FL 34655-4722

City/State and Zip Code

jcgruen@gmail.com

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

For further information concerning this matter, please call:

James C. Gruen

813, 784-7470

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

THE PRIOR Angels International Aviation (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) July 28, 2010 The Articles of Organization for this Limited Liability Company were filed on L10000079182 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Professional Air Resources LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 1747 Orchardgrove Avenue Enter new principal offices address, if applicable: New Port Richey, FL 34655-4722 (Principal office address MUST BE A STREET ADDRESS) 1747 Orchardgrove Avenue Enter new mailing address, if applicable: New Port Richey, FL 34655-4722 (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 new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:

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 Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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

| 2 | <u>Name</u> | Address | Type of Action |
|----------|-------------|---------|---|
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| D. If amendi | ng any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
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| | February 21 2013 |
| Dated | James C. Lines |
| - | Signature of a member or authorized representative of a member |
| | // James C. Gruen |
| - | Typed or printed name of signee |

Page 3 of 3

Filing Fee: \$25.00

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