1110000 45803

(Re	questor's Name)	
·	,	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
(60	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	1

Office Use Only



000343420550

04/21/20--01007--050 **25.00

MAY 0 1 2020
S. YOUNG

COVER LETTER

TO:		stration Section of Corp					
SHRIF	CT·	UNITY JET:	S L.L.C				
.,(,1301,	··· _		Name of Lim	ited Liability Company			
			mendment and fee(s) are sub-				
Please r	eturn a	all correspon	dence concerning this matter	to the following:			
			MICHAEL K FISH				
				Name of Person		_	
			MICHAEL K FISH CPA I	PA			
				Firm/Company		_	
	7700 N KENDALL DR STE 405						
				Address			
			MIAMI FL 33156				
			CONTACT@MKFISHCPA	City/State and Zip Code		_	
			E-mail address: ()	to be used for future annual repo	ort notification)		
For furt	her inf	ormation co	ncerning this matter, please ca	all:			
МІКЕ				305 279-8-	484		
		Name of I	Person	Area Code I	Daytime Telephone Numbe	r	
Enclose	d is a	check for the	following amount:				
\$25	.00 Fi	ing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	d) Certifie	ate of Status &	

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

UNITY JETS LLC			- FR - 11
	d Liability Compan A Florida Limited I.	y as it now appears on our records.) iability Company)	22 2
The Articles of Organization for this Limited Li Florida document number L11000045803	ability Company	were filed on 04/18/2011	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liabi	lity company here:	
N/A			
The new name must be distinguishable and contain the w	ords "Limited Liabil	ity Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	N/A	
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>ΒΟΧ)</u>	N/A	
B. If amending the registered agent and registered agent and/or the new registered of			ter the name of the nev
Name of New Registered Agent:	N/A		
New Registered Office Address:		Enter Florida street address	
		, Florida	n.
		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>	Address	Type of Action
MGR	CHAD HOWETT	9830 SW 77 Avenue, #230	_
		MIAMI, FL 33156	
	\		≅ Remove
			☐ Change
			Add
			Removê
			☐ Change
			□ Remove
			☐ Change
			Remove
			Change
			Add
			□ Remove
			Change
			
			Remove

-	
-	
_	
•	
•	
(If an e Note:	tive date, if other than the date of filing:
If the re (b) Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear e 90th day after the record is filed.
Dates	THE 14TH OF APRIL 2020
	Town of the second

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00