

L11000053835

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

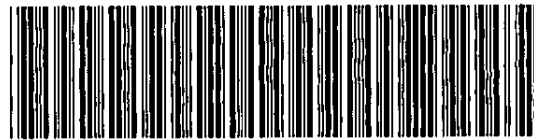
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 APR 21 P 12:15

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DENNIS R. HABER, P.A.

Providing Independent General Counsel services to the Business & Aviation Community

Of Counsel:

Jill Sharon White, Esq. 2
Jill@lawyermiami.com

Dennis R. Haber, Esq. 1
Dennis@lawyermiami.com
Dennis@av8lawyer.com

1 Admitted to Florida, Washington, D.C., and New York
2 Admitted to Florida

April 15, 2016

Member:

Lawyer-Pilot Bar
Assn.

AOPA Plan
Provider

NBAA

EAA

Services:

General Counsel

Contract
Development

NTSB, DOT, and
FAA matters and
Administrative
Hearings

Aircraft
Registration &
Cape Town
Convention Issues

Aircraft & FBO
Sales & Purchase

Corporate &
Entity Formation

Commercial &
Business
Litigation

Debtor / Creditor
Rights

Employment Law

Lease & Finance
Negotiations

Mediation &
Arbitration

1031 Exchanges

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

Re: N128HB LLC

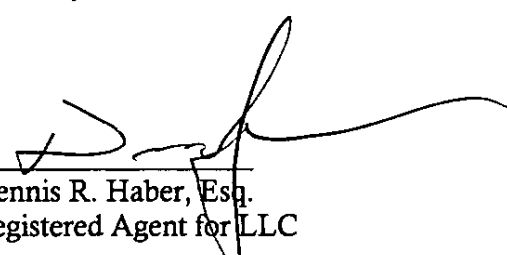
Dear Sir or Madam;

With respect to the above referenced corporation, enclosed please find the following:

1. Cover Letter;
2. Articles of Amendment to Articles of Organization of N128HB LLC;
3. Filing fee of \$25.00;

Upon your receipt and review, I would appreciate your processing same. Should you require further documentation or have any concerns, please feel free to contact me.

Sincerely,


Dennis R. Haber, Esq.
Registered Agent for LLC

DRH:ad

Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: N128HB LL

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:

Dennis R. Haber, Esq.

Name of Person

Firm/Company

8925 SW 148 St., #200

Address

Miami, FL 33176

City/State and Zip Code

Dennis@lawyermiami.com

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

For further information concerning this matter, please call:

Dennis R. Haber, Esq.

Name of Person

305
at ()
Area Code

256-3002
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

N128HB 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 5/6/11 and assigned
Florida document number L11000053835.

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(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:

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

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TALLAHASSEE
FLORIDA

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	Peter J. LoBello	8925 SW 148 St., #200	<input type="checkbox"/> Add
		Miami, FL 33176	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Gustavo E. Hegewisch	2121 Ponce de Leon Blvd., #405	<input checked="" type="checkbox"/> Add
		Coral Gables, Fl 33134	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 2018 APR 21 PM 4:15
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 TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

This image shows a single page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

E. Effective date, if other than the date of filing: 4/14/16 (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated April 15, 2016

Signature of a member or authorized representative of a member

Typed or printed name of signee

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CLERK OF STATE
TALLAHASSEE, FLORIDA