## 412000018052

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
•	,	•
PICK-UP	☐ WAIT	MAIL.
_		_
(Bu	siness Entity Nai	me)
(Do	cument Number)	)
Certified Copies	_ Certificate:	s of Status
,		<del></del>
Special Instructions to	Filing Officer:	
	•	
		-

Office Use Only



100287672661

07/13/16--01026--014 \*\*25.00

2016 JUL 13 A 8: 50
SECRETARY OF STATE
JALLAHASSEF, FLORID

CONT. BRUCE

## **COVER LETTER**

	Registration Sec Division of Corp			
SUBJEC		AL AVIATION SECURITY	SERVICES, LLC	
SUBJEC	1:	Name of Lim	nited Liability Company	
The enclo	sed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please ret	urn all correspon	idence concerning this matter	to the following:	
		IAN ILLYCH MARTINE	Z, ESQ.	
		•	Name of Person	
		BELLO & MARTINEZ, P	PLLC.	
			Firm/Company	<del></del>
		2850 DOUGLAS ROAD,	SUITE 303	
			Address	
		CORAL GABLES FL 331	134	1AL 201
			City/State and Zip Code	MACON JUL 1
		imartinez@bmrlawgroup.co		
		E-mail address: (	to be used for future annual report notifica	mion) SST U
For furthe	er information co	ncerning this matter, please ca	all:	
IAN ILL	YCH MARTINE		305 442-7970 at ()	88 m 88 m
	Name of	Person	Area Code Daytime T	elephone Number
Enclosed	is a check for the	e following amount:		
\$25.0	0 Filing Fee	☐ S30.00 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

Liability Compa Florida Limited	any as it now appears on our re Liability Company)	cords.		
ility Company	were filed on FEB 6, 2012		_ and as:	signed
,				
ing:				
e limited liab	oility company here:			
s "Limited Liabi	lity Company," the designation "	LLC" or the abbr	eviation "L	.L.C."
le:				
ADDRESS)	N/A	- <del></del>		
		Z	.20	
		59	<del>- 53</del>	77
		7	Ş	- 1
Enter new mailing address, if applicable:		(2722	w	i i
<u>(X)</u>		177		- Frankling
		윤피		
		ords, <u>enfer tl</u>	ie <u>marie</u>	of the .
<u>e address her</u>	<u>e</u> :			
N/A				
	Enter Florida street ac	idress		
		Elovido		
<del>a .</del>	Citv	, คเอกเฉม	Zip Code	
	Liability Composition of Composition Company  ility Company  ng:  e limited liab  s "Limited Liabi e:  ADDRESS)  registered of address her	registered office address on our rece address here:    Enter Florida street address on the content of the conte	Idity Company as it now appears on our records.  Florida Limited Liability Company)  FEB 6, 2012  Idity Company were filed on FEB 6, 2012  Ing:  Ing:  Ing:  Ing:  Ing:  Ing:  Ing:  Ing:  Indicated Liability Company here:  Ing:  Ing: Ing:	ADDRESS)  N/A  Feregistered office address on our records, enfor the adame e address here:  N/A  Enter Florida street address  FEB 6, 2012  and assembly assem

## 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>	Type of Action
COO	VICTOR GRULLON	4471 NW 36 ST UNIT 225	
		MIAMI, FL 33166	■ Remove
			<b>■</b> Change
AMBR	VICTOR GRULLON	4471 NW 36 ST UNIT 225	Add
		MIAMI, FL 33166	□ Remove
			■ Change
CEO	DELIA GRULLON	4471 NW 36 ST UNIT 225	
		MIAMI, FL 33166	Remove
			■ Change
MGR	DELIA GRULLON	4471 NW 36 ST UNIT 225	<b>=</b> Add
		MIAMI, FL 33166	PRemove HEE
			Change
			Add U
			Or 5 Remove
			☐ Change
		_	□ Add
			□ Remove
			□ Change

		<u> </u>	
N/A		.	
		;	1
		<u>'</u>	1
		<u></u> '	
		ļ	; ; ;
		<u> </u>	i
· · · · · · · · · · · · · · · · · · ·	<u> </u>		,
	<u> </u>		<u> </u>
			·
		<u> </u>	7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
			TO BY MI
		<u> </u>	AHL ASS
		ŀ	
			0.21 0.21 0.21
			1
	A7//1 MA1Z		i :
Tective date, if other than the	date of filing:  07/11/2016 t be specific and cannot be prior to date of filing or the specific and ca	(0	ptional)
ote: If the date inserted in this blocument's effective date on the Do	ock does not meet the applicable statutory fili epartment of State's records.	ng requirements,	this date will not be listed
record specifies a delayed The 90th day after the rec	l effective date, but not an effective ord is filed.	time, at 12:0	1 a.m. on the earlier
JULY 11	2016		•
		ļ.	·
-	<i>\$71/-</i>		
	Signature of a member or authorized representative	e of a member	· · · · · · · · · · · · · · · · · · ·
DELIA GRULLON		i	
<u> </u>	Typed or printed name of signee	!	· · · · · · · · · · · · · · · · · · ·
		<b>]</b> ;	•
	Down 3 of 3		
	Page 3 of 3	1	