## L12000083595

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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12/15/20

## **COVER LETTER**

TO: Registration S Division of Co	Section orporations		
	NSULTING AVIATION LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles o	of Amendment and fee(s) are sub-	nitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
	JEAN MARIE TAGNE TA	AGNE	
		Name of Person	
	JEAN MARIE TAGNE TA	AGNE	
	<del></del>	Firm/Company	<del></del>
	14651 BISCAYNE BLVD	STE 116	
		Address	<del></del>
	NORTH MIAMI FL 331	81	
		City/State and Zip Code	
	JEANMARIETAGNE22@g	gmail.com to be used for future annual report notifi	cation)
For further information	concerning this matter, please ca		,
JEAN MARIE TAGN	E TAGNE	305 890 8612	
Namo	e 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 Addi Registration Division of P.O. Box 6 Tallahassee	n Section Corporations 327	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	porations allahassee : Street, Suite 810

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

ACE CONSULTING AVIATION LLC				
(Name of the Limited (A	Liability Company Florida Limited Liab	as it now appears offity Company)	on our records.)	
The Articles of Organization for this Limited Liab Florida document number L12000083595	ility Company we	ere filed on 067.	and assigned	
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of th	ne limited liabilit	y company her	<u>re</u> :	
ACE CONSULTING AVIATION LLC				
The new name must be distinguishable and contain the word	is "Limited Liability	Company," the de	signation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicab	le:	14651 BISCAYI	NE BLVD	
(Principal office address MUST BE A STREET.		STE 116		
Trincipal Office and con 1300 132 11 03 XIII.		NORTH MIAM	FL 33181 8	
nter new mailing address, if applicable: <u>Sailing address MAY BE A POST OFFICE BOX</u>		N/A	EN D	
B. If amending the registered agent and/or reg agent and/or the new registered office address	istered office add here:	dress on our re	cords, enter the name of the new register	
Name of New Registered Agent:	JEAN MARIE TAGNE TAGNE			
New Registered Office Address:	14651 BISCAYN	·		
		Enter Flor	ida street address	
	NORTH MIAMI	FL	, Florida 33181	
		City	Zip Code	

## New Registered Agent's Signature, it 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. Lhereby 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
MGRM	JEAN MARIE TAGNE TAGNE	14651 BISCAYNE BLVD STE 116 NORTH MIAM	II ≣Add
			_ □Remove
			□Change
MGRM	HECTOR RIVADENEYRA		🗀 Add
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Filing Fee: \$25.00

Typed or printed name of signee