K12000114362

(Red	uestor's Name)	
(Add	lress)	
(,	
(Add	iress)	
(City	//State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
	cument Number)	
(500)	ament Namber)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



200381081612

03/15/22--01026--009 **25.00

FILED 2022 HAR 15 AM 10: 40 SECRETABLY OF STATE

A. BUTLER MAR 2 9 2022

COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
My Jet Sav	er, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and feets) are sub-	mitted for filing	
		-	
	Richard L. Richards		
		Name of Person	
	Richards Legal Group	Name of Limited Liability Company Indiment and feets) are submitted for filling, the concerning this matter to the following: Richard L. Richards Name of Person Richards Legal Group Firm/Company 55 Miracle Mile, Suite 310 Address Coral Gables, FL 33134 City/State and Zip Code ichards@richpa.net E-mail address: (to be used for future annual report notification) ruing this matter, please call: at (
		Firm/Company	
	55 Miraele Mile, Suite 310	•	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Name of Limited Liability Company mendment and fee(s) are submitted for filing. lence concerning this matter to the following: Richard L. Richards Name of Person Richards Legal Group Firm/Company 55 Miracle Mife. Suite 310 Address Coral Gables, FL 33134 City/State and Zip Code rrichards@richpa.net b-mail address: (to be used for future annual report notification) cerning this matter, please call: at (
	Coral Gables, FL 33134		
	• .		
For further information c			neation)
Richard L. Richards			
Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Mailing Addres Registration 5			ction
Division of C	orporations	Division of Cor	porations
P.O. Box 632	27	The Centre of T	allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 MAR 15 AM 10: 40

My Jet Saver, LLC

(Name of the Limited Liability Company as it now appears on our records.) A. J. OF STATE (A Florida Limited Liability Company) TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.12000114362}{1.12000114362}$.	were filed on and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabil	ty Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3053 New York Street, Miami, FL 33133
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	3053 New York Street, Miami, Fl. 33133
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new registered</u>
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 agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and rowided for in Chapter 605. F.S. Or, if this document is

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	Maria Alejandra Marin	14970 NW 42nd Ave. Suite 45-20	🗆 Add
		Miami, FL 33054	= Remove
			□Change
AMBR	Maria Alejandra Marin	14970 NW 42nd Ave. Suite 45-20	□Add
		Miami, Fl. 33054	Remove
			Change
AMBR	Maria Alejandra Martinez Ugas	14970 NW 42nd Ave. Suite 45-20	□Add
		Miami, FL 33054	■Remove
			□ Change
MGR	Maria Alejandra Martinez Ugas	3053 New York Street, Miami, Fl. 33133	≘ Add
			□Remove
			□Change
			□Add
		□Remove	
		□Change	
			□Add
			🗆 Remove
			Change

		•			
					
-				· · · · · · · · · · · · · · · · · · ·	
			····		
			<u> </u>		
		<u></u>	<u> </u>	•	
					
	 				<u></u>
fective date, if other than the n effective date is listed, the date mustre: If the date inserted in this blecument's effective date on the December 1.	be specific and cannot ock does not meet th	t be prior to date o le applicable stat	f filing or more than sutory filing require	(optional) 10 days after filing.) Pursus ements, this date will no	int to 605.0207 of be listed as
ecord specifies a delayed effectiv is filed.	date, but not an eff	ective time, at 1	2:01 a.m. on the ea	arlier of: (b) The 90th	day after the
March 08	202				
(-		2_5	>_		
	Signature of a membe	r or authorized rep	resentative of a men	iber	

Filing Fee: \$25.00