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07/18/19--01013--004 **25.0

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COVER LETTER

TO: Registration Section Division of Corporations

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COUGAR AVIATION LLC SUBJECT:

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:

IDA C OVIES

IDA C OVIES CPA PA

Firm/Company

Name of Person

3785 NW 82 AVE STE 302

Address

DORAL FL 33166

City/State and Zip Code

I@IDAOVIES.COM

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

For further information concerning this matter, please call:

IDA COVIES

Name of Person

<u>4775798</u> Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status

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

COUGAR AVIATION 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 11/19/2012	and assigne
Florida document number L12000145860	

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 "LLC."

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 ad	ldress on our records, enter the name of the
registered agent and/or the new registered office address here:	
	ກໍ່ຫ

New Registered Office Address:		
	Enter Florida street address	•

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 th 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

2-0

Zip Code

10

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> bei or removed from our records:

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	<u>Name</u> Burello, alejandro	Address	<u>Type of Ac</u>
AMBR		3785 NW 82 AVE STE 302	🖬 Add
		DORAL FL 33166	
		<u> </u>	Remove
	TRIPOLATTI, FABIO ARIEL	3785 NW 82 AVE STE 302	Change
AMBR		5765 NW 62 AVE STE 502	🗆 Add
		DORAL FL 33166	
			CRemove
			🖬 Change
			🗆 Add
			C Remove
			Change
			🛛 Add
			🛛 Remove
		<u> </u>	Change
			Add
			🗖 Remove
			Change
<u> </u>			🗆 Add
		<u> </u>	Remove
			Change

	D.	If amending any other	information, enter	change(s) here:	(Attach additional sheets,	if necessary.)
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E. Effective date, if other than the date of filing: _______(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

Note: If the 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 <u>Note:</u> 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	JULY 12	2019
	<u> </u>	
	F	Signature of a member or authorized representative of a member
	ALEJ	ROBURELLO
	<u> </u>	Typed or printed name of signce

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Filing Fee: \$25.00