

L13000025900

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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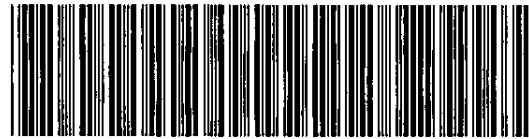
(Business Entity Name)

(Document Number)

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13 DEC 12 AM 9:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 13 2013

T. BROWN

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: S W BURNS AVIATION/LOGISTICS "LLC."
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:

LUCRETIA BURNS

Name of Person

Firm/Company

24 MAGNOLIA DR N

Address

ORMOND BEACH, FL 32174

City/State and Zip Code

AVIATIONBURNS@YAHOO.COM

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

For further information concerning this matter, please call:

LUCRETIA BURNS

Name of Person

at (**386 437-3235**)

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 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**

S W BURNS AVIATION/LOGISTICS "LLC."

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
13 DEC 12 AM 9:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 02/18/2013 and assigned
Florida document number L13000025900.

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 end with 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)

24 MAGNOLIA DR N

ORMOND BEACH, FL 32174

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

24 MAGNOLIA DR N

ORMOND BEACH, FL 32174

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: LUCRETIA BURNS

New Registered Office Address: 24 MAGNOLIA DR N

Enter Florida street address

ORMOND BEACH

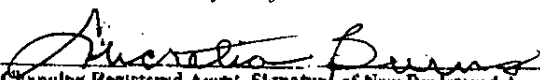
Florida 32174

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 608, 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.


Lucretia Burns
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	LINDA PLATTE	1783 DAYTONA LANE	<input type="checkbox"/> Add
		JACKSONVILLE, FL 32218	<input checked="" type="checkbox"/> Remove
MGR	LEONARD CLARK	1008 W KING ST	<input type="checkbox"/> Add
		ST AUGUSTINE, FL 32084	<input checked="" type="checkbox"/> Remove
MGR	ANGELO V LAWSON	1783 DAYTONA LANE	<input type="checkbox"/> Add
		JACKSONVILLE, FL 32218	<input checked="" type="checkbox"/> Remove
MGR	TAFF FOWLER	2511 LIGUSTRUM RD	<input type="checkbox"/> Add
		JACKSONVILLE, FL 32211	<input checked="" type="checkbox"/> Remove
MGRM	LUCRETIA BURNS	24 MAGNOLIA DR N	<input checked="" type="checkbox"/> Add
		ORMOND BEACH, FL 32174	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated 12-4-13

Lucretia Burns
Signature of a member or authorized representative of a member

Lucretia Burns
Typed or printed name of signer

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Filing Fee: \$25.00