113000051477

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	-
(C	ity/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nam	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
wana	form	. 4085



200316388262

08/02/18--01013--023 **52.50

SECRETARY OF STATE
SECRETARY OF

Name Change

AUG 0 8 2018 D CUSHING

COVER LETTER

TQ: Registration So Division of Co	ection rporations				
SUBJECT: Inters	tate Transport USA, LLC.				
		ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Adalber	to Angel Perez			
		Name of Person			
	Interstate	Transport USA, LLC.			
		Firm/Company			
	15250 SV	V 268 STREET			
		Address			
	A	MIAMI, FL. 33032		بينية ماريخ	$\tilde{\mathbb{K}}_{a_1}$
	A	City/State and Zip Code		, T.P.	215 226
		ngineSolutionGroupLLC@Yal to be used for future annual report notif		<u> </u>	7 (T) 13 3 11
For further information of	concerning this matter, please co	·	,	3 72 24	RY OF A
Adalberto Per	·ez	at (786) 250-9603		<u>သ</u> သ်	A A
Name o	of Person		Telephone Number	02	S.KOI.S
Enclosed is a check for t	he 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 Str Certified Copy (additional copy is e	atus &	

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



August 3, 2018

ADALBERTO PÉREZ INTERSTATE TRANSPORT USA, LLC 23739 SW 133 AVE HOMESTEAD, FL 33032

SUBJECT: INTERSTATE TRANSPORT USA, LLC.

Ref. Number: L13000051477

We have received your document for INTERSTATE TRANSPORT USA, LLC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 718A00016023

Diane Cushing Senior Section Administrator

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Interstate (Name of the Limit	Transport US	SA, LLC.	agare on our regards	~~~ S
(Name of the Limi	(A Florida Limi	ted Liability Compan	pears on our records.) y)	્ર
The Articles of Organization for this Limited L			OH108/301	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited l	iability company	here:	
Aviation Engine Solution Group. The new name must be distinguishable and contain the	LLC. words "Limited L	iability Company," th	ne designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	<u>N/A</u>		
(Principal office address MUST BE A STREE	<u>ET ADDRESS</u>	<u> </u>	<u> </u>	
				
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE	(BOX)			
B. If amending the registered agent and registered agent and/or the new registered of			on our records, ente	r the name of the new
Name of New Registered Agent:	N/A_			
New Registered Office Address:	N/A	Enter F	Florida street address	
		2277201 1		
		City	, Florida _	Zip Code
New Registered Agent's Signature, if changing	Registered Age	ent:		

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.

N/A	
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

Title	<u>Name</u>	Address	Type of Action
NA	N/A	N/A	
			Remove
			☐ Change
		☐ Remove	
		 	Change
			Remove
			Change
		Add	
			Remove
			Change
			
		Remove	
			☐ Change
			□ Remove
			Change

	_N/A
	
If an c Note:	tive date, if other than the date of filing: 9/30/2015 (optional) flective 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 (and the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a transfer of the Department of State's records.
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00