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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
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COVER LETTER

•	istration Se ision of Cor			
SUBJECT:	Vaughn Ac	ro, LLC		
JOBJEC I.		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		Jacob Vaughn		
			Name of Person	· · · · · · · · · · · · · · · · · · ·
		Vaughn Aero, LLC		
			Firm/Company	ne Telephone Number \$60.00 Filing Fee, Certificate of Status & Certified Copy
		1311 S Dixie Hwy, West	IIA	
			Address	
		Pompano Beach , Fi 33060)	
			City/State and Zip Code	
		coastalmarble@bellsouth.ne		
		E-mail address: (to be used for future annual report notifi	cation)
For further in	iformation co	oncerning this matter, please ca	ali:	
Mitchell Tay	or CPA		561 367-1568	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
□ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status &

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

Vaughn Aero, LLC				
(Name of the Lir	nited Liability ((A Florida Lii	Company as it now appears or mited Liability Company)	our records.)	
he Articles of Organization for this Limited	•	npany were filed on May	30, 2013	and assigned
lorida document number L13000078582	·			
his amendment is submitted to amend the fo	ollowing:			
. If amending name, enter the new name	of the limited	d liability company here:		•
NA '				
he new name must be distinguishable and contain the	words "Limited	Liability Company," the design	nation "LLC" or the ab	breviation "L.L.C."
nter new principal offices address, if appl	licable:	NA		
Principal office address MUST BE A STRE	ET ADDRES	SS)		
				·
nter new mailing address, if applicable:		NA	·	
Mailing add <mark>ress MAY BE A POST OFFIC</mark> I	E BOX)			7
•			Ţ,	5 /
If amending the registered agent and egistered agent and/or the new registered	d/or registere	ed office address on ou	r records, enter	the name of the π
PRODUCTION OF THE NEW PERSIETES	omee audies	a nore.	-08	
Name of New Registered Agent:	NA			- 9
New Registered Office Address:			· · · · · · · · · · · · · · · · · · ·	
		Enter Flortda s	treet address	
			, Florida	
		City		7in 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 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

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
AMBR	Ronald Rupp	1380 E . Terra Mar Dr.	= Add
		Pompano Beach ,FL 33062	
			☐ Change
			Add
			Remove
			_ Change
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fective date, if other than the date of filing:	(optional) late of filing or more than 90 days after filing.) Pursuant to 60	5,020
ote: If the date inserted in this block does not meet the applicable	statutory filing requirements, this date will not be lis	ied a
ocument's effective date on the Department of State's records.		
record specifies a delayed effective date, but not a The 90th day after the record is filed.	n effective time, at 12:01 a.m. on the earl	ier (
The Folh day after the record is filed.		
, May 8 2017		
ited		
1/2/1/2011		
Signature of Amember or authorize	A ranga antativa al a mambar	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00