L13 000106736

(Re	equestor's Name)	
(Ad	dress)	-
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Na	me)
(Do	ocument Number)	
Certified Copies	_ Certificate:	s of Status
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2020 FPR 21 PR 3: 15

Amend

APR 22 2020 LALBRITTON

COVER LETTER

TO:	Registration Sec Division of Corp			K.T	OT MED
Arte en		TON AND CONSULTING S	ERVICES LLC		
SUBJE		Name of Lim	ited Liability Company	202017	23 /** 1: 32
		Amendment and fee(s) are sub	· ·		
ricase	return att correspon	dence concerning this matter	to the following;		
		JOAO LUIZ MALAGO			
			Name of Person	 .	
		JLM AVIATION AND CO	DNSULTING SERVICES	LLC	
			Firm/Company	<u>-</u>	
		23269 STATE ROAD 7, S	UITE 119		
			Address		
		BOCA RATON - FLORID	OA 33428		
		PRIMEINCOMETAX1@G	City/State and Zip Code MAIL.COM		
		E-mail address: ()	to be used for future annual ru	port notification)	
For furt	ther information con	ncerning this matter, please co	all:		
JOAO	LUIZ MALAGO			9399	
	Name of	Person	at () Area Code	Daytime Telephor	ne Number
Enclose	ed is a check for the	following amount:			
≡ \$25	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclo		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address:		Street Ado	<u>lress:</u>	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



April 3, 2020

JOAO LUIZ MALAGO 23269 STATE ROAD 7 STE. 119 BOCA RATON, FL 33428

SUBJECT: JLM AVIATION AND CONSULTING SERVICES LLC

Ref. Number: L13000106736

We have received your document for JLM AVIATION AND CONSULTING SERVICES LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

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: 820A00007305

Irene Albritton
Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JLM AVIATION AND CONSULTING SERVICES LLC

(<u>Name of the Limited Lia</u> (A Flo	oility Company as it now appears on ida Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Florida document number L13000106736	$\sqrt{\text{Company were filed on } \frac{07/29/26}{2}}$	013	and assigned
	<u> </u>		
This amendment is submitted to amend the following			
A. If amending name, enter the new name of the l	mited liability company here:		
The new name must be distinguishable and contain the words "	imited Liability Company," the designation	ation "LLC" or the abbr	
Enter new principal offices address, if applicable:			2020
(Principal office address MUST BE A STREET AD	DRESS)	: 1	77 1: -79
			22
Enter new mailing address, if applicable:		· 	ي
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
B. If amending the registered agent and/or registe agent and/or the new registered office address her	econce address on our record	us, <u>enter the name</u>	of the new register
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida st		
	tmer r tortaa si	reet aaaress	
	City	Florida	Zip Code
New Registered Agent's Signature, if changing Regist			mp cone
I hereby accept the appointment as registered age provisions of all statutes relative to the proper and accept the obligations of my position as registered	nt and agree to act in this capa I complete performance of my c	luties, and I am far ter 605, F.S. Or, if	niliar with and 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>	Name	<u>Address</u>	Type of Action
MGR	LUIS H DE LIMA FIGUEIREDO	10860 HAYDN DRIVE,	
		BOCA RATON - FL 33498	□Remove
			□Change
			□Add
			[]Remove
			□Change
			□Add
			Remove
			Change
			□Remove
			☐ Change
	, , , , , , , , , , , , , , , , , , , 		□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

	PLEASE, ADD THE MANAGER LUIS HENRIQUE DE LIMA FIGUEIREDO
F Fffe	tive date if other than the date of filings
Note	effective date, if other than the date of filing:
If the record is	ord 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 filed.
	MARCH, 16 2020