



(((H24000310486 3)))



H240003104863ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : H & CO, LLP
Account Number : I20150000089
Phone : (305)444-8800
Fax Number : (305)444-4010

2024 SEP 12 PM 3:43
FILED
SECRETARY OF STATE
TALLAHASSEE, FL

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
AERO VERTOL LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

M. SOLOMON
SEP 12 2024

(((H24000310486 3)))

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

AERO VERTOL 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 05/02/2014 and assigned
Florida document number LI14000071294.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

4709 NW 72ND AVE

MIAMI, FL 33166

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4709 NW 72ND AVE

MIAMI, FL 33166

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:

New Registered Office Address:

Enter Florida street address

Florida

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 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

(((H24000310486 3)))

(((H24000310486 3)))

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	Name	Address	Type of Action
MGR	FLORES TYMCHUK, LEONARDO ALEXIS	2330 PONCE DE LEON BLVD	<input type="checkbox"/> Add
		CORAL GABLES, FL 33134	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	FLORES TYMCHUK, CRISTIAN ANTHONY	2330 PONCE DE LEON BLVD	<input type="checkbox"/> Add
		CORAL GABLES, FL 33134	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	TYMCHUK, NATALIYA	2330 PONCE DE LEON BLVD	<input type="checkbox"/> Add
		CORAL GABLES, FL 33134	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	FLORES TYMCHUK, LEONARDO ALEXIS	4709 NW 72ND AVE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33166	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	FLORES TYMCHUK, CRISTIAN ANTHONY	4709 NW 72ND AVE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33166	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	TYMCHUK, NATALIYA	4709 NW 72ND AVE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33166	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
2024 SEP 12 PM 3:43
SECRETARY OF STATE
TALLAHASSEE, FL

(((H24000310486 3)))

((H24000310486 3)))

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

FILED
2024 SEP 12 PM 3:48
SECRETARY OF STATE
TALLAHASSEE, FL

E. Effective date, if other than the date of filing: 09/02/2024 (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)(b)

Note: 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 SEPTEMBER 2, 2024

Signature of a member or authorized representative of a member

FLORES TYMCHUK, LEONARDO ALEXIS

Typed or printed name of signee

((H24000310486 3))