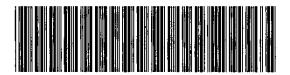


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## **COVER LETTER**

TO: Registration Se Division of Cor			
	ents Aero, LLC		
SUBJECT:	Name of Lim	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:	
	Eric Greenberg		
		Name of Person	
	Business Aviation La	aw Group PLLC	
		Firm/Company	
	3606 Enterprise Ave	e, Suite 249	
		Address	
	Naples, FL 34104		
		City/State and Zip Code	The control of
	entities@businessav		
		to be used for future annual report notification	" <del>ද්</del> ධ 🐯 🚃
For further information of	concerning this matter, please c	all:	388. Y. Y. Y
Eric Greenberg		888 661-3223	
Name o	of Person	Area Code Daytime Telep	whone Number Signature Sig
Enclosed is a check for the	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 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

Components Aero, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L15000021580 .	were filed on 02/04/2015	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2501 Northwest 34th Place	
(Principal office address MUST BE A STREET ADDRESS)	Pompano Beach, FL 33069	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		r the name of the new
Name of New Registered Agent:	<del>-</del> · ·	— <u>इति</u> स्व
New Registered Office Address:	Enter Florida street address	SSSE FLE
	City	Zip Gode 5
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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

<u>itle</u>	<u>Name</u>	Address	Type of Action
			□ Add
			☐ Remove
			☐ Add
	Ĵ		□ Remove
			Add
		<del></del>	□ Remove
			Remove 2015 FEB 24
			IS FEB 24 PH 2: 42
			2 <b>2</b>
			Add
			Remove

r change(s) here: (Attach a	dditional sheets, if necessary.)
	the state of the s
ing:  o date of receipt or filed date and coment of State)	(optional) mnot be more than 90 days after
<b>プ</b>	
a member or authorized represer	tative of a member
	ling: date of receipt or filed date and cament of State) 2015

Page 3 of 3

Filing Fee: \$25.00

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