

L15000040001

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

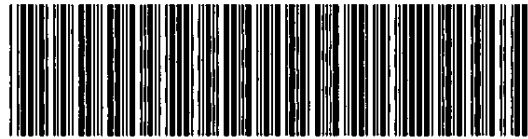
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/30/15--01036--024 **25.00

FILED
APR 30 PM 4:46
CLERK OF COURT
STATE OF TEXAS

APR 17 2015
S. YOUNG

CSC (NCH)
BG/IFF - OTHER

TO: PHYSICAL: Dept. of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING: Dept. of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

FROM: National Corporate Headquarters, Inc.
5605 Riggins Court Suite 200
Reno NV 89502
(800) 638-2320
(775) 329-0852

DATE: Tuesday, March 17, 2015

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

- Articles of Amendment to Articles of Organization
for **DECAT AEROSPACE SOLUTIONS, LLC**

We have included payment in the amount of \$25.00 for the following fees:

- Filing fee

We have included one original and one copy of the Articles.

If there are any questions, please call 800-638-2320

Please return the file stamped copy of the Articles to the address below:

Processing Department
5605 Riggins Court Suite 200
Reno NV 89502

FILED
15 MAR 30 PM 4:44
CORPORATE DIVISION
TALLAHASSEE, FL

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DECAT AEROSPACE SOLUTIONS, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Karen Aiazzi

Name of Person

Corporate Service Center

Firm/Company

5605 Riggins Court Suite 200

Address

Reno, NV 89502

City/State and Zip Code

processingdepartment@nchinc.com

E-mail address: (to be used for future annual report notification)

FILED
15 MAR 30 PM 4:44
CLERK OF SUPERIOR COURT
STATE OF NEVADA

For further information concerning this matter, please call:

Processing Department

at (**800**) **638-2320**

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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

DECAT AEROSPACE SOLUTIONS, LLC

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Margarita DeCataldo	3700 Galt Ocean Drive #215	<input type="checkbox"/> Add
		Fort Lauderdale, FL 33308	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

FILED
MAY 30 4:14 PM
ST. JAMES

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 3/17/2015

Michael DeCataldo

Signature of a member or authorized representative of a member

Michael DeCataldo

Typed or printed name of signer

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15 APR 30 PM 4:44
PROPERTY OF STATE
TREASURY