

L15000141979

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2015 DEC 23 PM 12:38
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DEC 28 2015
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: WINGS & WINGS AIR TRADE 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:

JORGE IBRAHIM

Name of Person

WINGS & WINGS AIR TRADE LLC

Firm/Company

10850 NW 21 ST, SUITE #190

Address

MIAMI, FL 33172

City/State and Zip Code

finance@wingwingcorp.com

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

For further information concerning this matter, please call:

MARTHA GONZALEZ

786 409-7155 XT#216
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

WINGS & WINGS AIR TRADE 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 08/19/2015 and assigned
Florida document number L15000141979.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

11432 NW 69 TER

Enter Florida street address

DORAL

City

Florida 33178-5537

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

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>	<u>Address</u>	<u>Type of Action</u>
MGR	GARMENDIA, JULIO		<input type="checkbox"/> Add
		10879 NW 59 ST, MIAMI, FL 33178	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	IBRAHIM, JORGE		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		11432 NW 69 TER, DORAL, FL 33178-5537	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2010 DEC 2 PM 3:38
TALLAHASSEE FLORIDA

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

SEE SIGNED "RESIGNATION OF MANAGER" DOCUMENT ATTACHED FOR REMOVAL OF
MANAGER "GARMENDIA, JULIO".

E. Effective date, if other than the date of filing: 12/21/2015 (optional)

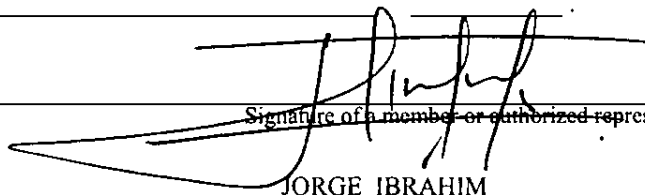
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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 DECEMBER 21

2015



Signature of a member or authorized representative of a member

JORGE IBRAHIM

Typed or printed name of signee

2015 DEC 23 PM 12:08
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

RESIGNATION

TO: The Members and Managers of
Wings & Wings Air Trade, LLC; a Florida limited liability company

I, JULIO GARMENDIA, hereby tender my resignation as Manager and whatever other position I may hold in Wings & Wings Air Trade, LLC, a Florida limited liability company, effective immediately.

Dated: December 21, 2015



JULIO GARMENDIA

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TALLAHASSEE FLORIDA