Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RICHARDS & PARTNERS, P.A.

Account Number : I20110000091 Phone : (305)858-9900

: (305)285-0015 Fax Number

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

E1	Address:			
EID WILL	MUUI CDD.			 -

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HELICENTRO AVIATION LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

JUN 23 2021

A. LUNT

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

	Registration Sec Division of Corp					
		RO AVIATION LLC				
SUBJECT:Name of Lim			ed Liability Company			
The encl	osed Articles of	Amendment and fee(s) are subm	nitted for filing.			
Please re	eturn all correspon	ndence concerning this matter t	o the following:			
		DARLIN ESPINOSA				
			Name of Person			
		RICHARDS & PARTNER	S, P.A.			
			Firm/Company			
		2665 S BAYSHORE DRIV	/E STE 703			
		Address				
		MIAMI, FL 33133				
		City/State and Zip Code				
		DESPINOSA@RICHARDS	S-LAW.COM to be used for future annual report no	tification)		
For furt	her information o	concerning this matter, please co				
DARLI	IN ESPINOSA		305 858-9900 at ()			
	Name o	f Person	Area Code Dayti	me Telephone Number		
Enclose	ed is a check for t	he following amount:				
■ \$25	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Addre		Street Address: Registration S			
Division of Corporations			Division of Corporations The Centre of Tallahassee			
	P.O. Box 632 Tallahassee,			roe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HELICENTRO AVIATION LLC		
(Name of the Limited Liability (A Florida	ty Company as it now annears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number	Company were filed on 9/21/2015	and assigned
	_	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
ANCLA Industries LLC		
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" of	r the abbreviation "LEC"
Enter new principal offices address, if applicable:		J OR
(Principal office address MUST BE A STREET ADDI	RESS)	22 CZ
Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)		AM 10: 40
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, enter th	e name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
•	. Flor	ida
	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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person	being added
Il amending Authorized Person(s) authorized to manage, enter the transfer of the second secon	
or removed from our records:	

MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Acd
			□Remove
			☐ Change
		·	⊖Add
			Remove
			Change
			□ Add
			□ Remove
		·	DAdd
	•		
			☐ Change
			□Add
			Remove
			☐ Change
			□Add
			□Chenne

	y other information, enter change(s) here: (Attach additional sheets, if necessary.)	
		
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260 11 1.4.	if other than the date of filing:	
	(optional) is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to the inserted in this block does not meet the applicable statutory filing requirements, this date will not be	o 605.02 Histod
Note: If the da document's eff:	ective date on the Department of State's records.	
e record specific rd is filed.	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day	arter ti
Dated	UNE 22 , 2021.	
	Ferral PedriqueZ	_
	Signature of a member or authorized representative of a member Fernan Rodriguez	

Filing Fee: \$25.00