

LI5000 168794

Florida Department of State
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.

((H15000238630 3)))



H150002386303ABC

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 : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

****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

ULTRA PILOT HELICOPTER USA, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

RECEIVED

15 OCT -5 PM 4:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 OCT -5 AM 7:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 06 2015

08/16/2033 06:22
OCT-05-2015 15:08

VIGO & VIGO, LLP

#0395 P.002/004
305 266 5758 P.002
H15000238630

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

ULTRA PILOT HELICOPTER USA, 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 10/01/2015 and assigned
Florida document number L15000165794.

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 "LLC."

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: EDSON MARTINS LOPES JR.

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

H15000238630

08/16/2033 06:22
OCT-05-2015 15:08

VIGO & VIGO, LLP

#0395 P.003/004

300 400 500 600
H15000238630

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
AMBR	EDSON MARTINS LOPES JR	260 CRANDON BLVD STE 32 #95	<input type="checkbox"/> Add
		KEY BISCAYNE, FL 33149	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	JESSICA GARJIONI	260 CRANDON BLVD STE 32 #95	<input type="checkbox"/> Add
	MARTINS LOPES	KEY BISCAYNE, FL 33149	<input type="checkbox"/> Remove
			<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 type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

H15000238630

OCT-05-2015 15:08

305 266 5758

P.004

U15000238630

(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 605.020? (3)(b)

(Dated 10 / 05

2015

X  Signature of a member of

Signature of a member or authorized representative of a member

Type of printed name of signer