

5/23/2017

L15000201058

Division of Corporations

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : JELEN ACCOUNTING SERVICES, INC
Account Number : I20120000052
Phone : (305)591-9180
Fax Number : (305)591-9167

2017 MAY 23 AM 9:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: info@jelenaccounting.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
2307 JET SOLUTIONS, LLC

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Corporate Filing Menu

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K. SALY

MAY 24 2017

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
2017 MAY 23 AM 9:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2307 JET SOLUTIONS, 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 05/23/2017 and assigned
Florida document number LJ5000201058

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:

JELEN ACCOUNTING SERVICES, INC.

New Registered Office Address:

8181 NW 36 STREET SUITE 13AB

Enter Florida street address

DORAL

City

Florida 33166

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.

[Signature]
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>
MGRM	SIMON ALEJANDRO LOPEZ	8181 NW 36 ST STE 13AB	<input type="checkbox"/> Add
		DORAL, FL. 33166	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	SIMON ESTEBAN LOPEZ	8181 NW 36 ST STE 13AB	<input type="checkbox"/> Add
		DORAL, FL. 33166	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ANTONINO CAVALCANTE	8181 NW 36 ST STE 13AB	<input checked="" type="checkbox"/> Add
		DORAL, FL. 33166	<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

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

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E. Effective date, if other than the date of filing: _____ (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 MAY 23 2017

Signature of _____

Signature of a member or authorized representative of a member

SIMON ALEJANDRO LOPEZ

Typed or printed name of signee