L160000000494

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
(0)					
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Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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COVER LETTER

Division of C					
AIR AN	MERICA HOLDINGS	LLC			
SUBJECT:	į, c	lame of Limited Liab	ility Company		
Dear Sir or Madam:					
The enclosed Statemen	at of Correction and fee(s) a	re submitted for filing	5 ,		
Please return all corres	pondence concerning this n	natter to the following	:		
PHILIP ANDRON	IICOS				
	Name of Person		•		
AIR AMERICA H	OLDINGS LLC				
	Firm/Company				
147 NW 87TH S	TRT				
	Address				
EL PORTAL, MI	AMI , FL , 33150	·			
	City/State and Zip Code		•	2	
PHILIP@AIRAM	ERICA.AERO			The Carlo	, per rer j
E-mail address: (to be used for future annual	report notification)	•		Ça misti eya ≪ask
				753 O	ξ 277.7N 1 11
For further information	n concerning this matter, ple	ase call:			, 27.5 s
PHILIP ANDRON	-	305	542 9382	05	
Name	e of Person	at (at Code	Daytime Telephone Nun	nber	
STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, Florida 32	ns Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check fo	or the following amount:				
\$25 Filing Fee	\$30 Filing Fee & Certificate of Status	\$55 Filing Fee Certified Copy	& S60 Filing Fee, Certificate of Status & Certified Copy	:	

CR2E062 (9/15)

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

		Certified Copy:	\$25.00 \$30.00 (optional)					
		Filing Fee:	\$25.00					
		Registered Age	nt's Signature					
New F I herel provis obliga reflect	ing the Register by acceptions of cations of	designation). ed Agent's Signature, if changing Registered Agent: pt the appointment as registered agent and agree to a all statutes relative to the proper and complete performy position as registered agent as provided for in Cage in the registered office address, I hereby confirm to	act in this capacity. I further agree to rmance of my duties, and I am famil hapter 605, F.S. Or, if this documen	o compl iar with t is bein	y with the and accept the ag filed to merely			
Sionat	ure of n	Signature of Authorized Representative ew registered agent, if applicable :(NOTE: if correct	Date	vigtered	agent must sign			
		electronic transmission of the record was defective.		5.05				
	<u>OR</u>		61 (71 (71 (71	5 U				
			AH	2819	6 / 32M4 /			
	OR Was o	defectively signed. The manner in which the docume lows:	ent was defectively signed and the a		ite correction are			
Ż	stater	tains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected ment are as follows: NATO RABBIOLA should read RENATO RABBIOLO						
		(CHECK THE APPROPRIATE BOX AND COM	PLETE THE APPLICABLE STA	TEME	ENT			
THIRD: Document to be corre		L 16000066494 Document to be corrected is:						
SECO	L 160000664 SECOND: The Florida Document number of the limited liability company is:							
		•						
Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. AIR AMERICA HOLDINGS LLC FIRST: The name of the limited liability company is:								