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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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Office Use Only

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lucky Lindy Aviation, LLC		
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
	ility Company were filed on 06/02/2016 and assigned	
This amendment is submitted to amend the follow	ing:	
A. If amending name, <u>enter the new name of t</u>	ie limited liability company here:	
The new name must be distinguishable and contain the word	is "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET.	ADDRESS)	
Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE BC</u>	<u></u>	- -
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our records, enter the name of the n e address here:	. <u>ew</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	, Un
	, Florida City Zip Code	
New Registered Agent's Signature, if changing Reg	istered 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, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	Type of Action
AMBR	Adi Bernstein	\$00 Fairway Dr., Ste. 293	🔜 🖬 Add
		Deerfield Beach, FL 33441	C Remove
			Change
AMBR	David Alcalay	800 Fairway Dr., Ste. 293	🖬 Add
		Deerfield Beach, FL 33441	Remove
			Change
AMBR	Ahaion Alcalay	300 Fairway Dr., Ste. 293	Add
		Deerfield Beach, FL 33441	C Remove
		·····	Change
AMBR	Ben Zion Alcalay	800 Fairway Dr., Stc. 293	
		Deerfield Beach, FL 33441	□ Remove
			Change
			Q Add
			Remove
			Change
			CI Add
			C Remove
			Change

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

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(If an of <u>Note:</u>	tive date, if other than t fective date is listed, the date n If the date inserted in this hent's effective date on the	nust be specific and block does not m	cannot be prior to c ect the applicable	ate of tiling or more th e statutory filing req	(optional) an 90 days after filing.) uirements, this date	Pursuant to 605.0207 (3)(b will not be listed as the
If the re (b) The	cord specifies a delay 90th day after the re	ed effective da ecord is filed.	ate, but not a	n effective time	, at 12:01 a.m. o	on the earlier of: 1 cr
Dated	December 15	/:	2023			
	,	<u>A A</u>				

Dated	moer 15	2023
17atec	,	<u> </u>
	(穴山川	#-Nul
	7	Signature of a member or authorized representative of a member
	/ /	
Ľ	David Alcalay	f.
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Typed or printed name of signee