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COVER LETTER

	Registration Sec Division of Corp			
SUBJEC	r: <u>David (</u>	Carrier Aviation LLC Name of Limi	ited Liability Company	
The enclo	sed Articles of z	Amendment and fee(s) are sub-	mitted for filing.	
Please ret	urn all correspor	idence concerning this matter	to the following:	
		Debbie Car	rier Name of Person	
		David_Carrie	er Aviation LLC Firm/Company	
		2664 Jewett	Lane	
		Sanford, EL3	277.1 City/State and Zip Code	
		debbie carrier (6 E-mail address: (7	Dauantumflo com o be used for future annual report noti	fication)
For furthe	r information co	neerning this matter, please ca	ill:	
De	ebbie Carrier Name of	to the same of the	at (<u>386</u>) <u>753-970</u> Area Code Daytim	2 e Telephone Number
Enclosed	is a check for the	e following amount:		
\$25.0	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u>David Carrier Aviation LLC</u> (Name of the Limited I. (A.F.	iability Compai Florida Limited L	ny as it now appears on our records.) lability Company)	
The Articles of Organization for this Limited Liabil	lity Company	were filed on _07/07/2016	and assigned
Florida document number <u>L16000128785</u>	 ,		
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liabi	lity company here:	
The new name must be distinguishable and contain the words	"Limited Liabili	ity Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:		3
(Principal office address MUST BE A STREET A	(DDRESS)	2664_Jewett_Lane	<u></u> မ
		_Sanford_Fl 32771	7 <u>·</u> ·
Enter new mailing address, if applicable:		2664 Jewett Lane	F.
(Mailing address MAY BE A POST OFFICE BO)	<u>X)</u>	Sanford, El 32771	
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent: New Registered Office Address:	.,.	ett Lane Enter Florida street address	a_32771
		City	rip 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

. 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>	Name	Address	Type of Action
MGR_	David_P_Carrier	_2664_Jewett_Lane	Add
		Sanford, Fl 32771	□ Remove
			Change
AMBR_	Debbie B Carrier	_2664_Jewett Lane	□ Add
		_Sanford, FL32771	☐ Remove
			Change
			Remove
			Co Chânge
			□ Add
			☐ Remove
			Change
			☐ Remove
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			□ Remove
			☐ Change

			 	
				
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ective date, if other than the effective date is listed, the date mu	date of filing:		(optional)
effective date is listed, the date mule: If the date inserted in this b	st be specific and cann lock does not meet t	ot be prior to date of he applicable statu	filing or more than 90 days	s after filing.) Pursuant to 605.02 s, this date will not be listed
ument's effective date on the I	epartment of State's	s records.		
	-		_	
record specifies a delaye he 90th day after the rec		but not an eff	ective time, at 12:	01 a.m. on the earlier
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ed November 27	: 20)18 ·		
	12ce		esentative of a member	
	Tionatii Amma memb	er or authorized reni	resentative of a member	

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Filing Fee: \$25.00