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COVER LETTER

Division of Co	ection rporations		į	
AERO MI U bjec t:	LITARY GROUP LLC			
Name of Limited Liability Company				
ne enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
ease return all correspond	ondence concerning this matter	to the following:		
	JORDANA CHEING		•	
	-	Name of Person		
	AERO MILITARY GROU	JP LLC		
		Firm/Company		
	4441 COCONUT CREEK	BLVD		
		Address		
	COCONUT CREEK, FL 3	33066		
	JCheing@AeroMG.com	City/State and Zip Code	<u> </u>	
		to be used for future annual report noti	fication)	
or further information o	oncerning this matter, please ca	all:		
ORDANA CHEING		305 351-6480		
Name o	f Person		Telephone Number	
nclosed is a check for the	he following amount:			
S25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Statu 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**

AERO MILITARY GROUP LLC

	Company as it now appears on our records.) amited Liability Company)	
The Articles of Organization for this Limited Liability Cor Florida document number <u>L16000156569</u>	mpany were filed on 08/22/2016	and assigned
This amendment is submitted to amend the following:		,
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "I.I.C" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRE	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register registered agent and/or the new registered office addressing the Name of New Registered Agent:	red office address on our records, <u>en</u> ss here:	ter the name of the n
New Registered Office Address:		100 P
The Megistres Office (Muless).	Enter Florida street address , Florida	N 7: 25 LORIG
Nam Basistand Assatt Cingata (C. 1. 1. D. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	City	⇒ Zip Code
New Registered Agent's Signature, if changing Registered Agent and hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacted the obligations of my position as registered agent in the obligations of my position as registered agent in the registered of the fill of the proper and company has been notified in writing of this change.	d agree to act in this capacity. I further aplete performance of my duties, and I do not as provided for in Chapter 605, F.S.	m familiar with and Or, if this document is

Page 1 of 3

	d from our records:		
MGR = 1 $AMBR = 1$	Manager Authorized Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	SAYLLI S GUZMAN	5083 NW 195TH TER	V ■ Add
		MIAMI GARDENS, FL 33055	
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fective date, if other than th	e date of filing:	(optional)]
an effective date is listed, the date m	ust be specific and cannot be prior to date of filing or block does not meet the applicable statutory fil	more than 90 days after filing.) Pursuant to (05.020 isted a
e record specifies a delaye The 90th day after the re	ed effective date, but not an effective cord is filed.	time, at 12:01 a.m. on the ea	rlier o
OCTOBER 25	2017		
	-		
	South		
	Signature of a member or authorized representati	ve of a member	

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Filing Fee: \$25.00