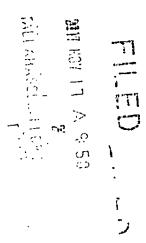


(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

Filone: 630-536-1300	
ACCOUNT NO. : 12	2000000195
REFERENCE : 90	8109787
AUTHORIZATION : AUTHORIZATION	ulbelenen
COST LIMIT : \$	`25.00
ORDER DATE : November 13, 2017	
ORDER TIME : 3:47 PM	
ORDER NO. : 908245-010	
CUSTOMER NO: 8109787	#:
<u>DOMESTIC AMENDMEN</u> NAME: AWESOME AIR, LLC	VT FILING
EFFECTIVE DATE:	
XXX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORAT	CION
PLEASE RETURN THE FOLLOWING AS PROOF	OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Roxanne Turner EX	(T# 62969

EXAMINER'S INITIALS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

pany as it now appears on our records.) d Liability Company)		
ny were filed on 09/13/2016	and ass	signed
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bility Company," the designation "LLC" or	the abbreviation "L	.L.C."
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, Florid	da Zip Code	
	office address on our records, ere: Enter Florida street address Florid.	office address on our records, enter the name ere: Enter Florida street address Florida

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>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Add
			Remove
			Change
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ective date, if other than the date of filing:	(optional)	
effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 de: If the date inserted in this block does not meet the applicable statutory filing requirements		
ument's effective date on the Department of State's records.		
record specifies a delayed effective date, but not an effective time, at 1 he $90 ext{th}$ day after the record is filed.	2:01 a.m. on	the earlier
ed		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00