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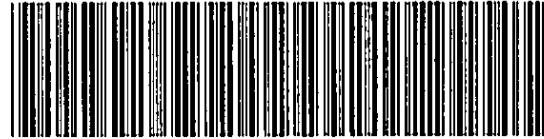
(Business Entity Name)

(Document Number)

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A. RIVERS

JAN 13 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Keys Cardinal Flyers, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven Oropeza

Name of Person

Firm/Company

8 West Cypress Ter

Address

Key West, FL 33040

City/State and Zip Code

spine-n-line@icloud.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph McMonigle

Name of Person

at (305) 395-0501

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Keys Cardinal Flyers, LLC.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on December 2, 2016 and assigned Florida document number L 16000219048.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8 West Cypress Terr
Key West, FL 33040

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME AS Principal address above ↑

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Steven Bropera

New Registered Office Address:

8 West Cypress, Terrace, Key West, FL
Enter Florida street address
Key West Florida 33040
City Zip 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.


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>	<u>Type of Action</u>
MGR	Steven Oropesa	8 West Cypress Terr	<input type="checkbox"/> Add
		Key West, FL 33040	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Christopher D. Dryden	308 Princess St	<input checked="" type="checkbox"/> Add
		Alexandria, VA 22314	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Joseph McMonigle	6 Allamanda Terrace	<input type="checkbox"/> Add
		Key West, FL 33040	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	David F. Grider	29980 Overseas Hwy	<input type="checkbox"/> Add
		PO Box 430536	<input checked="" type="checkbox"/> Remove
		Big Pine Key, FL 33043	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Joseph McMonigle

Typed or printed name of signee