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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		,

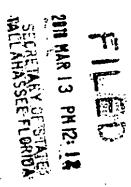
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J. WARRIS

COVER LETTER

Division of Co	porations		
Jet 24 LLC SUBJECT:			
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Andrey Avramenko		
		Name of Person	
	Jet 24 LLC		
		Firm/Company	
	13516 Aquiline Rd		
		Address	·
	Jacksonville, FL 32224		
		City/State and Zip Code	***
	jet24lle@gmail.com		
	h-mail address: (to be used for future annual report notifi	cation)
For further information of	concerning this matter, please co	all:	
Natalya Avramenko		904 955-4893 at ()	
Name (of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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:

TO:

Registration Section

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

pany as it now appears on our records.) d Liability Company) by were filed on December 13, 2016	
y were filed on December13, 2016	
	and assigned
bility company here:	
bility Company," the designation "LLC" of	r the libbreviation "L.L.C.".
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	53 N 11
	DATE N
office address on our records, <u>s</u> ere:	enter the name of the I
Enter Florida street address	
Flori: City	da Zip Code
	office address on our records, gere: 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 = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
		~	☐ Change
			☐ Remove
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If an effective date is listed, the date i	he date of filing: must be specific and cannot be prior to date of block does not meet the applicable sta Department of State's records.	of tiling or more than 90 days after .	filing.) Pursuant to 605,020
he record specifies a delay The 90th day after the r	ed effective date, but not an e ecord is filed.	ffective time, at 12:01 a	.m. on the earlier o
Dated March 9	2018		7 21 1AC
	Andrew		LAH
	Signature of a member or authorized re	presentative of a member	- SS - ω (
	1/		LD)

Page 3 of 3

Filing Fee: \$25.00