

L17000103541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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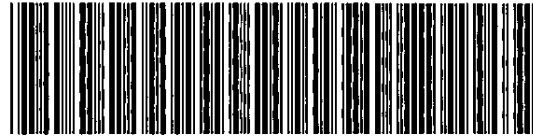
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
17 MAY 19 PM 4:49

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: AERIAL DRONE PHOTOGRAPHY & VIDEOGRAPHY, 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:

William M. Powell, Esquire

Name of Person

Powell, Jackman, Stevens & Ricciardi, P.A.

Firm/Company

3515 Del Prado Boulevard South, Suite 101

Address

Cape Coral, Florida 33904

City/State and Zip Code

william@lawinfo.pro

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

For further information concerning this matter, please call:

William M. Powell

239 540-3333
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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

AERIAL DRONE PHOTOGRAPHY & VIDEOGRAPHY, 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 05/11/2017 and assigned
Florida document number L17000103541.

This amendment is submitted to amend the following:

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

AERIAL DRONE PROFESSIONALS, LLC

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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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:

New Registered Office Address:

3515 Del Prado Boulevard South, Suite 101

Enter Florida street address

Cape Coral

, Florida 33904

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.

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>	<u>Type of Action</u>
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

17 MAY 19 PM 4: 50

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E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated May 16

2017

Signature of a member or authorized representative of a member

Typed or printed name of signee

POWELL, JACKMAN, STEVENS & RICCIARDI, P.A.

Waterside Plaza
3515 Del Prado Boulevard South, Suite 101
Cape Coral, Florida 33904
Phone (239) 540-3333
Fax (239) 540-3336
E-Mail: william@lawinfo.pro
Web Page: <http://www.lawinfo.pro>

Evening Star Building
1101 Pennsylvania Avenue, NW
Suite 600
Washington, D.C. 20004
Phone (202) 464-3231
Toll Free (800) 852-6585
Please Reply to Cape Coral Office

4575 Via Royale, Suite 200
Fort Myers, Florida 33919
Phone (239) 689-1096
Fax (239) 791-8132

E-Mail: rjackman@your-advocates.org
Web Page: <http://www.your-advocates.org>
Please Reply to Cape Coral Office

Runacam Building
351 N.E. 8th Avenue
Ocala, Florida 34470
Toll Free (800) 852-6585
Please Reply to Cape Coral Office

May 16, 2017

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Aerial Drone Photography & Videography, LLC

Dear Sir/Madam:

Enclosed please find herewith a Cover Letter, Articles of Amendment and \$25 check in connection with the above-referenced matter.

Thank you for your attention to the foregoing.

Very truly yours,

WILLIAM M. POWELL

William M. Powell

William M. Powell

Signed in his absence to avoid delay.

WMP/nag
Enclosures

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