## 417000142964

(Re	equestor's Name)	
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JAN 2 9 2019 J. HARRIS

## **COVER LETTER**

AIR IQ. LLC  UBJECT:			
	Name of Lan	ассе вланиу Сопрану	
e enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
ase return all correspo	ondence concerning this matter	to the following:	
	Steven Gareleck		
		Name of Person	
	Mayes Research, LLC		
	Firm/Company 7401 Princeton Trace NE		
		Address	
	Atlanta, GA 30328		
		City/State and Zip Code	
	steve@costmg.com		
	E-mail address: (	to be used for future annual report notif	ication)
r further information o	concerning this matter, please ca	all:	
even Gareleck		678 472-5887	
Name c	of Person	Area Code Daytime	· Telephone Number
closed 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 enclose

MAILING ADDRESS:

Registration Section

TO:

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

AIR IQ, LLC		
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records. Liability Company)	)
The Articles of Organization for this Limited Liability Company	were filed on <u>07/03/2017</u>	and assigned
Florida document number 1.17000142964		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	oility company here:	
MAVES RESEARCH, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4850 Ryna Greenbaum Drive	
(Principal office address MUST BE A STREET ADDRESS)	Suite 3120	
	West Palm Beach, FL 33417	7. No.
		ē.;
Enter new mailing address, if applicable:	7401 Princeton Trace NE	
Mailing address MAY BE A POST OFFICE BOX)	Atlanta, GA 30328	Ch.
		:
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	
	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>	Address	Type of Action
			Remove
		-	Change
			Add
			☐ Remove
			Change
			Remove
			□ Change
			Add
			☐ Remove
			F-3  Change
			☐ Remove
			□ Change

f amending any other informat	ion, enter change(s) here: 1.	Attach additional sheets, if i	necessary.)
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ffective date, if other than the (	date of filing:	(0	optional)
an effective date is listed, the date must lote: If the date inserted in this blo ocument's effective date on the De	be specific and cannot be prior to d ck does not meet the applicable	ate of filing or more than 90 days:	after filing.) Pursuant to 605,0207
e record specifies a delayed The 90th day after the reco		n effective time, at 12:0	01 a.m. on the earlier o
January 22,	2018		► . Po
ated	A		
$\mathcal{L}$	ton Y()		
	Signature of a member or authorize	ed representative of a member	<u> </u>
			<del>.</del> •
Steven Gareleck			<u> </u>
<u></u>	Typed or printed na	ime of signee	

Page 3 of 3

Filing Fee: \$25.00