## 117000156687

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DEC 03 2018 S. YOUNG

## **COVER LETTER**

	istration Se ision of Cor				
	Piece of Mi	nd Aerospace LLC			
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Brett Trembly			
		Trembly Law Firm	Name of Person		
		9700 S Dixie Highway, Pe	Firm/Company inthouse 1100		TALLAL F
		Miami, Florida 33156	Address		NOV 26 M LANASSEE, FI
		Brett@tremblylaw.com	City/State and Zip Code		7: 52
		E-mail address: (	to be used for future annual report	notification)	3>
For further in	nformation c	oncerning this matter, please c	all:		
Brett Trembl	ly		305 431-567		
	Name o	f Person	at () Area Code Da	ytime Telephone Number	
Enclosed is a	check for th	ne following amount:			
\$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
	MAIL	ING ADDRESS:	STREET/CO	URIER ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Piece of Mind Aerospace LLC				
(Name of the Lim	ited Liability Company (A Florida Limited Liab	as it now appears of oility Company)	n our records.)	
The Articles of Organization for this Limited L. 1.170001.56687	Liability Company we	ere filed on July 2	1.2017	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liabilit	v company here:	:	
he new name must be distinguishable and contain the	words "Limited Liability	Company," the desig	nation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appli	cable: _			<u> </u>
Principal office address MUST BE A STREE	ET ADDRESS)			E P T
Caton according address if applicables	-		<del> </del>	ED M 7
Enter new mailing address, if applicable:	-	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
Mailing address MAY BE A POST OFFICE				5 2
3. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:			ır records, <u>ente</u>	er the name of the i
New Registered Office Address:	9700 S. Dixie Hwy	y, Penthouse 1100		
ise w registered office readiess.	•	Enter Florida	street address	n = ·
	Miami		, Florida	33156
		City		Zip Code
New Registered Agent's Signature, if changing	Registered Agent:			
hereby accept the appointment as registere provisions of all statutes relative to the propactions of the obligations of my position as regioning filed to merely reflect a change in the company has been notified in writing of this	per and complete pe istered agent as pro registered office ad	rformance of my vided for in Cha	duties, and 1 an pter 605, F.S. O	n familiar with and r, if this document is

Cogistered 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 Type of Action Address Name <u>Title</u> Berlioz Nino 4000 Hollywood Blvd., Suite 555-**AMBR** □ Add Hollywood, Florida 33021 **■** Remove ☐ Change 4000 Hollywood Blvd., Suite 555-Eric Palencia MGR ■ Add Hollywood, Florida 33021 ☐ Remove Change NGV 26 M 7: 52 □ Add ☐ Remove ☐ Change \_□ Add \_□ Remove \_□ Change bb∧ □\_ ☐ Remove

☐ Change

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		<u> </u>				<del></del>		
Effective date, i	f other than i	the date of fili	ng:			_ (optional)		
(If an effective date i Note: If the date document's effective	inserted in this	s plock does not	meet me app	ileable statutor	g or more than 90 o	lays after filing.) I ents, this date w	fursuant to 605.	0207 (3 d as th
the record spec	cifies a dela	yed effective	date, but	not an effect	rive time, at 1	2:01 a.m. o	n the earlie	er of:
) The 90th da	y after the i	record is med	1.					
Novembe Dated	r 11		2018	·				
	11	//、						

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00