47000217758

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100305119341

11/07/17--01017--015 **25.00

17 NOV -6 PH 3: 23



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 27, 2017

JESUS HERNANDEZ 14750 SW 26TH ST, STE 203 MIAMI, FL 33185

SUBJECT: 5 J AVIATION SERVICES, LLC

Ref. Number: L17000217758

We have received your document for 5 J AVIATION SERVICES, LLC, however, upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist II

Letter Number: 317A00021796

9. 3 K-9 9- AON 1107

COVER LETTER

то:	Registration Se Division of Cor			28	
elib ie	·CT.	5 J AVIATI	ON SERVICES, LLC		
SUBJE		Name of Limi	ted Liability Company		
The end	closed Articles of	Amendment and fee(s) are sub-	nitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
			JESUS Y. HERNANDEZ		
		-	Name of Person		
		5 J A	VIATION SERVICES, LLC		
			Firm/Company	· · ·	
	14750 SW 26TH STREET, SUITE 203				
Address					
			MIAMI, FL 33185		
	City/State and Zip Code				
jadir@hispanicfactor.org					
Ear for	thas information o	E-mail address: (0 concerning this matter, please ca	o be used for future annual report noti	fication)	
ror iur		HERNANDEZ	305 610 1479		
	Name o	of Person		e Telephone Number	
Enclos	ed is a check for the	he following amount:			
\$ \$2:	5.00 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/COURIER ADDRESS:

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

NO 5

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	TON SERVICES, LLC		
(Name of the Limited Liability C (A Florida Lin	Company as it now appears mited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Com Florida document numberL17000217758	npany were filed on	10/20/2017	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	I liability company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited	Liability Company," the de	signation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u> </u>		# # T
Enter new mailing address, if applicable:			- b
(Mailing address MAY BE A POST OFFICE BOX)			
	 		<u></u>
B. If amending the registered agent and/or register registered agent and/or the new registered office addres		our records, <u>enter</u>	the name of the new
Name of New Registered Agent:	JESUS	Y. HERNANDEZ	
New Registered Office Address:	14750 SW 26T	H STREET, SUITE 20.	3
<u></u>	Enter Flori	da street uddress	
<u>,</u>	MIAMI	, Florida	33185
	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
MGR	JESUS Y. HERNANDEZ	14750 SW 26TH ST, SUITE 203	B Add
		MIAMI, FL 33185	☐ Remove
			Change
AMBR	JESSY HERNANDEZ	14750 SW 26TH ST, SUITE 203	Add
		MIAMI, FL 33185	☐ Remove
			Change Ti
AMBR	EDEINI LEMUS	14750 SW 26TH ST, SUITE 203	Addr Fill
		MIAMI, FL 33185	Remove)
			Change
AMBR	JADIR HERNANDEZ	14750 SW 26TH ST, SUITE 203	■ Add
		MIAMI, FL 33185	□ Remove
			Change
AMBR	ALEXANDRA SALAZAR	14750 SW 26TH ST, SUITE 203	■ Add
		MIAMI, FL 33185	☐ Remove
			Change
AMBR	JESUS Y. HENNAUDEZ TORRES	14750 SW 26TH ST, SUITE 203	= Add
	TORRES	MIAMI, FL 33185	Remove
			Change

N/A				
, ,				
		<u>.</u>		
			·- <u></u> -	
		·		<u></u>
			-	ب <i>ې</i>
		<u></u> -	<u> </u>	
				•
				
				<u> </u>
		-		
·				
ctive date, if other than the da	ite of filing:		(optio	onal)
effective date is listed, the date must be	e specific and cannot be price	or to date of filing or :	more than 90 days after	filing.) Pursuant to 605.020
If the date inserted in this block ment's effective date on the Depart			ng requirements, this	, date will not be usted a
ecord specifies a delayed e	ifective date, but n	ot an effective	tirne, at 12:01 a	a.m. on the earlier of
e 90th day after the record			•	
0.1.244	2017			
October 24th	. 2017			
		// /)		
		· W		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00