

L17 000 219 636

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

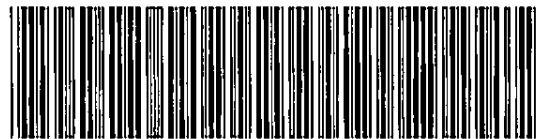
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800342101148

03/16/20--01020--022 **52.50

2020 JUN -1 AM 7:16
ALL INFORMATION
FILED

JUN 02 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LEGACY FLIGHTS, 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:

Eddie Lindsey
Name of Person

Legacy Air Holdings, LLC
Firm/Company

6118 ODOM RD.
Address

LAKELAND, FL 33809
City/State and Zip Code

elindsey@airtransportnetwork.us
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Steve Gelmacher at (879) 220-5028
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

LEGACY FLIGHTS, 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 10/23/17 and assigned
Florida document number L17000219636

This amendment is submitted to amend the following:

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

LEGACY AIR HOLDINGS, 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)

6118 ODOM RD.
LAKE LAND, FL 33809

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

10006 Military Dr.
HANGAR 32C
CONROE, TX 77303

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:

EDDIE LINDSEY

New Registered Office Address:

6118 ODOM RD.

Enter Florida street address

LAKE LAND

City

Florida

33809

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.

Eddie Lindsey
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>
<u>MGR</u>	<u>Daryl Hicks</u>	<u>3600 Drane Field Rd.</u>	<input type="checkbox"/> Add
		<u>STE. 200</u>	
		<u>LAKELAND, FL 33811</u>	<input checked="" type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>MGR</u>	<u>Stephanie Hicks</u>	<u>3600 Drane Field Rd.</u>	<input type="checkbox"/> Add
		<u>STE 200</u>	
		<u>LAKELAND, FL 33811</u>	<input checked="" type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
<u>MGR</u>	<u>Eddie Lindsey</u>	<u>6118 000m RD.</u>	<input checked="" type="checkbox"/> Add
		<u>LAKELAND, FL 33809</u>	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change

2022 JUN 16
LAKELAND
FL 33811
LAKELAND
FL 33811

of
the
1970's

1976

2020 JUN -1	TH 7-16
-------------	---------

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.

Dated 05-20-20, 2020

Eddie Palmer
Signature of a member

Signature of a member or authorized representative of a member

Eddie Lindsey
Typed or printed name

Typed or printed name of signee

Filing Fee: \$25.00