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(Red	questor's Name)	
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## **COVER LETTER**

	Registration Se Division of Cor			
	Aero Brew	ing Company, LLC		
SUBJEC	CT:	·		
		Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		Eduardo H. Guerra		
			Name of Person	. 2
		Aero Aircraft Company, L	LC	2021 Lian 29 PH 4: 06
			Firm/Company	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
		6917 Conley Dr		9 PI
			Address	10 ×
		Polk City, FL 33868		FEE OF
		edhguerта@gmail.com	City/State and Zip Code	
		E-mail address; (	to be used for future annual report notification	on)
For furth	er information c	oncerning this matter, please c	all:	
Eduardo	H Guerra		404 216 5712	
	Name o	f Person	at () Area Code Daytime Tele	phone Number
Enclosed	is a check for th	ne following amount:		
■ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fec & 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 Addres Registration S Division of C P.O. Box 632	Section orporations 7	Street Address: Registration Section Division of Corpora The Centre of Tallah	tions nassee
	Tallahassee, F	L 32314	2415 N. Monroe Str Tallahassee, FL 323	-

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Aero Brewing Company, LLC		
(Name of the Limited Liability Company as it now a (A Florida Limited Liability Comp	appears on our records.) Dany)	
The Articles of Organization for this Limited Liability Company were filed of Florida document number	November 13, 2017	_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability compa	ny here:	
Aero Aircraft Company, LLC	2.5	20:
The new name must be distinguishable and contain the words "Limited Liability Company,	"the designation "LLC" or the abbre-	viation "L.L.C."
	: <u></u>	55
Enter new principal offices address, if applicable:		<u>√0 i</u>
(Principal office address MUST BE A STREET ADDRESS)	·	171
	; · ; · ; · ;	
	-1-1	4 2
	77 (m) 174	D6
Enter new mailing address, if applicable:	_	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office address on a agent and/or the new registered office address here:	our records, <u>enter the name o</u>	f the new regi
Name of New Registered Agent:		·
New Registered Office Address:		
	er Florida street address	
	w.,	
	, Florida	

## 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.

City

Zip Code

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
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ffective date, if other than than effective date is listed, the date in ote:  If the date inserted in this occument's effective date on the	block does not meet	the applicable	date of filing or n e statutory filin	op ore than 90 days af ag requirements, t	tional) ter filing.)Pur his date will	rsuant to (	605.0207 listed as
record specifies a delayed effect is filed.	ive date, but not an	effective time	, at 12;01 a.m.	on the earlier of:	(b) The 90	th day a	fter the
is med,		V/201					
24 March		2021 					
24 March	Signature of a mym			• Of a mountur			