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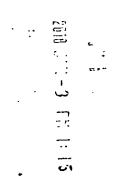
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M. HARRIS

COVER LETTER

	istration Sec ision of Corp					
aubirat	Helilcopter I	Holdings, LLC				
SUBJECT:		Name of Limited Liability Company				
The enclosed	I Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please return	all correspon	dence concerning this matter	to the following:			
		Debbe Chalifoux				
			Name of Person	Marie 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		Distinguished Investments	, LLC			
		· · · · · · · · · · · · · · · · · · ·	Firm/Company			
		365 W. Taft-Vineland Rd.,	Suite 105			
			Address			
		Orlando, FL 32824				
			City/State and Zip Code			
		Debsker1@aol.com				
		E-mail address: ()	to be used for future annual report notifi	cation)		
For further i	nformation co	ncerning this matter, please ca	all:			
Debbe Chal	ifoux		407 908-5732			
	Name of	Person	Area Code Daytime	Telephone Number		
Enclosed is	a check for the	e following amount:				
■ \$25.00 E	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:

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

Helilcopter Holdings, LLC		
(Name of the Limited Liability (A Florida Li	Company as it now appears on our re imited Liability Company)	cords.)
The Articles of Organization for this Limited Liability Con	npany were filed on 12/27/2017	and assigned
lorida document number L17000262356		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limite	d liability company here:	
Distinguished Investments, LLC		
he new name must be distinguishable and contain the words "Limited	d 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 ADDRE	(22)	(20)
The this office address word be A STREET ADDRESS	SS)	
	· · · · · · · · · · · · · · · · · · ·	· .
		77
Enter new mailing address, if applicable:		- 40 a
Mailing address MAY BE A POST OFFICE BOX)		••
		· 41
B. If amending the registered agent and/or register registered agent and/or the new registered office address		ords, <u>enter the name of th</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ac	ddran
	vnier r iorida street al	MITESS
		, FloridaZip Code
	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>	Name	<u>Address</u>	Type of Action
			□ Add
			□ Remove
			☐ Change
			Remove
			Change
			Add
			☐ Remove
			□ Change
			Add
			Remove
			
			☐ Add
			☐ Remove
			☐ Change
			□ Add
			Remove
			☐ Change

tive date, if other than the date of filing: 12/27/2017 (optional) Pertive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 6. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be linent's effective date on the Department of State's records. Cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear a 90th day after the record is filed. December 27 2017 21 22 23 24 25 26 27 2017 26 27 28 28 29 Debbe R. Chalifoux	,			
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December 27 2017 25 Authorized representative of a member Signature of a member for authorized representative of a member			ot an effective time, at 1	2:01 a.m. on the earlie
Signature of a member for authorized representative of a member	ie sour day aree. are re	.cora is mear		
Signature of a member for authorized representative of a member	December 27	2017		7 Ca
Signature of a member for authorized representative of a member	:u	, ,	<u> </u>	≡ .
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Debbe R. Chalifoux		Signature of a member or auth	orized representative of a member	r sp.
Debbe R. Chalifoux		•		:
	Debbe R. Chalifoux			€
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Page 3 of 3

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