

L18000 019240

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

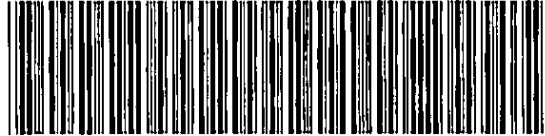
(Business Entity Name)

(Document Number)

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JUN 19 2018

STATE  
FACILITY - LONDON

18 JUN 15 PM 1:28

FILED

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

Flight Essentials, LLC  
SUBJECT: \_\_\_\_\_

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:

Henry Daniel Campos

\_\_\_\_\_  
Name of Person

Flight Essentials, LLC

\_\_\_\_\_  
Firm/Company

8049 NW 108th Place

\_\_\_\_\_  
Address

Doral, FL 33178

\_\_\_\_\_  
City/State and Zip Code

hless.manager@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Henry Daniel Campos

305

4699675

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**

**18 JUN 15 PM 1:20**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Flight Essentials, 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 22/ Jan/ 2018 and assigned  
Florida document number L18000019240.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

8049 NW 108th Place

Doral, FL 33178

USA

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

8049 NW 108th Place

Doral, FL 33178

USA

**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:

Dalia Cruz Miranda

New Registered Office Address:

8049 NW 108th Place

*Enter Florida street address*

Doral

*City*

Florida 33178

*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>	<u>Address</u>	<u>Type of Action</u>
MGR	Garcia, Carlos	6910 Maple Ter.	<input type="checkbox"/> Add
		Hialeah, FL 33014	<input checked="" type="checkbox"/> Remove
		USA	<input type="checkbox"/> Change
MGR	Campos, Henry	6910 Maple Ter.	<input type="checkbox"/> Add
		Hialeah, FL 33014	<input checked="" type="checkbox"/> Remove
		USA	<input type="checkbox"/> Change
MGR	Miranda, Dalia Cruz	8049 NW 108th Place	<input checked="" type="checkbox"/> Add
		Doral, FL 33178	<input type="checkbox"/> Remove
		USA	<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

## FBI/ EIN Number: 82- 4507511

[illegible]

(If an effective 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 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated June 11, 2018

*[Handwritten signature]*

Signature of a member or authorized representative of a member

Dalia Miranda

Typed or printed name of signee