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18 JUL 17 PH 5:0

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COVER LETTER

Division of Corporations
SUBJECT: Jet One Solutions 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:
Adelaide Moore Name of Person
Let One Solutions LLC Firm/Company
10278 N. Federal Huy Svite #235
Fort Landerdale FL 33308 City/State and Zip Code OCZabri Skie @ gmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Adelaide Moore at (954) 459-1141 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$\text{Certified Copy} \\ \text{tadditional copy is enclosed}\$\Bigcup \$\Bigcup \$\text{\$\text{Certified Copy} \\ \text{(additional copy is enclosed)}\$}\$

MAILING ADDRESS:

TO:

Registration Section

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

· ARTICLES OF O	RGANIZATION	F11
Ol	F	. ILED
· · · · · · · · · · · · · · · · · · ·	-	18 Juli -
11- 011:	s II C	FILED 18 JUL 17 PM 5: 00
<u>Let one Solution</u>	15 110	5. W
(Name of the Limited Liability Compan (A Florida Limited L.	y as it now appears on our records.)	# 1 Mar 19 52 1 \$7 1 m
	. 1	
The Articles of Organization for this Limited Liability Company	were filed on 3/22/18	and assigned
The Africas of Organization for this Emitted Elabitity Company of	were fried on	and assigned
Florida document number <u>L 8 0 0 0 7 4 6 1 3</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liability and Contain the words "Liability a	ty 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)		
Trucipal Office address STOST DE A STREET ADDRESSY		
Enter now modifies address if applicables		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off		nter the name of the new
registered agent and/or the new registered office address here	:	

Name of New Registered Agent:

Enter Florida street address

_. Florida ___ City

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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	Kelly Moore	6278 N. Federal Huy Svite #235	jx (Add	
		SUITE # 333	Remove	
		Fort Lauderdale Fi 3330	☐ Change	
			Add	
			Remove	
			Change Thange	
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D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an of Note:	tive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	July 16 2018. - Adlaide Na
	Signature of a member or authorized representative of a member
	Adelai de More Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00