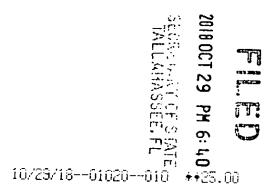
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3. PRATHER

## **COVER LETTER**

Division of Corporations TRANSBORDER AVIATION HOLDINGS, 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: JOHN KEERY Name of Person TRANSBORDER AVIATION HOLDINGS, LLC Firm/Company 7800 W OAKLAND PARK BLVD BLDG C, STE 306 Address SUNRISE, FL 33351 City/State and Zip Code vernam@diroccocpa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JOHN KEERY at (417 ) 833-1462
Area Code Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ■ \$25.00 Filing Fcc ☐ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (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 TO ARTICLES OF ORGANIZATION OF

2

TRANSBORD	ER AVIATION HOLDINGS, LI	.C	18000
(Name of the Limited Li (A F	ability Company as it now appears orida Limited Liability Company)	on our records.)	OT 29
The Articles of Organization for this Limited Liabili	ity Company were filed on	09/01/2018	and assigned
This amendment is submitted to amend the following	ığ:		6: 40
A. If amending name, enter the new name of the	limited liability company her	re:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the de	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable			· · · · · · · · · · · · · · · · · · ·
(Principal office address MUST BE A STREET A.	<u> </u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOY			
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter	r the name of the new
Name of Name Daylerand Assault			
Name of New Registered Agent:  New Registered Office Address:			
New Registered Office Address.	Enter Flori	da street address	
_	City	, Florida _	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>	Address	Type of Action
MGR	SCHIMUN CAVIEZEL	7800 W OAKLAND PARK BLVD	□ Add
		C 306	
			■ Remove
		SUNRISE FL 33351	
			Change
			Remove
			Change
			□ Remove
			Change
			Add
			Remove
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	iny other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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		<u> </u>	
Note: If the document's a	(optional) date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) date inserted in this block does not meet the applicable statutory filing requirements, this date reffective date on the Department of State's records.		
The 90th	day after the record is filed.		
Dated	October 25 2018		
	- And	Ç	201
_	Carrette of a member or authorized representative of a member		2018 OCT
	JOHN KEERY	A	T 29
-	Typed or printed name of signee	ASS S	
		Ĺn. Luga	PH
	Page 3 of 3	717	ف

Filing Fee: \$25.00