## 119000031439

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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Alphubet Jets LLC Name of Limited Liability Company
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:
- Jill Anne Brady Name of Person
Alphabet Jets, LLC
16 lighthouse Cir unit H
City/State and Zip Code  City/State and Zip Code  jody jaractewski 21 (a) gmail. com  E-mail address: (to behind for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\$\$ Certificate of Status &
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



November 16, 2019

JILL ANNE BRADY 116 LIGHTHOUSE CIRCLE UNIT H JUPITER, FL 33469

SUBJECT: ALPHABET JETS, LLC Ref. Number: L19000031439

We have received your document for ALPHABET JETS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document submitted does not meet legibility requirements for filing acceptance.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 119A00023584

Irene Albritton Regulatory Specialist II

2019 PEC 23 PEU2: 19

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

ARTICLES OF C	RGANIZATION	
0	F	200 00 /
	Jets LLC	MISORCES PAIR
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records liability Company)	1 7 2 2 C
The Articles of Organization for this Limited Liability Company Florida document number <u>L1900031439</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity 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)	116 lighthouse Jupiter FL	Cir UnitH
Trincipal office dataress wigst be A STREET ADDRESS)		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	116 lighthouse Jupiter F	e Cir unit H
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	P. M. H.	
	Enter Florida street address	
	, Flo	rida
	cuis	гір Соце

## 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 **Type of Action** <u>Title</u> Name. Address
116 11 gnthosse air snith Type of
Jup iter fl 33469 DAdd MGR Jill Anne Strady □ Remove ☐ Change AMBR Russell Wykoff Dive 1515 Perimeter Rd WPB, FL 33406 □ Add Remove ☐ Remove \_\_ 🗖 Change \_□ Add \_□ Remove \_□ Change \_□ Remove \_🗖 Change \_□ Add □ Remove

☐ Change

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(If an et <u>Note:</u>	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: e 90th day after the record is filed.
Dated	12-12-2019.
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00