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To:	Division of Corporations	
	Fax Number : (850)617-6383	
r	·	7070
From:	Account Name : GUZMAN & GUZMAN, P.A.	
	Account Number : I20080000090	433
	Phone : (305)670-1991	- C
	Fax Number : (305)670-1993	۵-
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**Fnter	the email address for this business entity to be used for	future
anı	nual report mailings. Enter only one email address please.	***
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DYNAMIC FLIGHT ACADEMY LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DYNAMIC FLIGHT ACADEMY LLC (Name of the Limited Link (A Flor	bility Compan rida Limited Li	y as it now appears on ability Company)	our records.		
The Articles of Organization for this Limited Liability Florida document number L19000268494				and assigned	!
This amendment is submitted to amend the following	;				
A. If amending name, enter the new name of the l	imited liabil	lity company here:			
			ortion "I I C" or the abl	previation "L.L.C."	
AMERICAN FLY LLC the new name must be distinguishable and contain the words "	Limited Liabili	ty Company, "the design	STUE 2ND FLOOR		76
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		255 ARAGON AVENUE, 210 T 20 T			
		CORAL GABLES FL, 33134			
					-9
		255 ARAGON AVENUE, 2ND FLOOR			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		CORAL GABLES FL, 33134			
B. If amending the registered agent and/or regist agent and/or the new registered office address he	<u>1.z.</u>		rds, <u>enter the nam</u>	e of the new reg	<u>ister</u>
Name of New Registered Agent:	ABITOS PLLC				
	255 ARAGON AVENUE, 2ND FLOOR				
New Registered Office Address:		Enter Florida	street audress		
c	ORAL GABI	_ES	, Florida 33	134 Zip Code	·

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

From: Johana Giraldo Fax: 18136585039 To: Fax: (850) 617-6383 Page: 4 of 5 09/09/2020 2:19 PM minending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	BOBBIO, MARCOS V	3801 S OCEÁN DR	□Add
		HOLLYWOOD, FL 33019	
			ElChange
			□Remove
			□Change
			□Add
			□Remove
			☐Change
***			□Add
			ClRemove
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			ERemove
			ClChange
			EJAdd
			Remove
			□ Change

amending any	other information.	enter change(s) h	ere: (Attach additional sh	ets, if necessa	gi)	
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Note: If the date	inserted in this block tive date on the Depa	t does not meet the a	ppiicanie statutory ming requ	rements, this da	te will not be	listed as the
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e record specific	: a delayed effective d	ate, but not an effect	ive time, at 12:01 a.m. on the	carlier of: (b)	The 90th day	after the
ord is filed.			•			
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Dated		11				
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Typed or printed name of signee