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| (Re                     | equestor's Name)   |           |
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| PICK-UP                 | ☐ WAIT             | MAIL      |
| (Bu                     | siness Entity Nam  | ne)       |
| (Do                     | ocument Number)    |           |
| Certified Copies        | _ Certificates     | of Status |
| Special Instructions to | Filing Officer:    |           |
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2022 JUN 21 AM 6: 57

A. BUTLER SEP - 9 2022

## **COVER LETTER**

| TO:  |         |                |                                  |  |                        |
|--|---------|----------------|----------------------------------|--|------------------------|
| aun in   | · •     | PROGRESS       | IVE AVIATION GROUP LLO           | C →  |                        |
| SUBJE  | CT:     |                | Name of Limit                    | ted Liability Company  |                        |
| Division of Corporations  PROGRESSIVE AVIATION GROUP 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:  Gary Celetti  Name of Person  GFC LAW PLLC  Firm/Company  2700 W Cypress Creek RoadSuite D-107  Address  Fort Lauderdale, FL 33309  City/State and Zip Code gary@gfclawfl.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Gary Celetti  Name of Person  Find address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Gary Celetti  Name of Person  For further information concerning this matter, please call:  Certificate of Status  Certificate Of Status & Certified Copy (additional copy is enclosed)  Mailing Address:  Registration Section Division of Corporations  Street Address:  Registration Section Division of Corporations |         |                |                                  |  |                        |
| Please r   | return  | all correspor  | ndence concerning this matter t  | to the following:  |                        |
|  |         |                | Gary Celetti                     |  | _                      |
|  |         |                |                                  | Name of Person   |                        |
|  |         |                | GFC LAW PLLC                     |  | _                      |
|  |         |                |                                  | Firm/Company   |                        |
|  |         |                | 2700 W Cypress Creek Ros         | adSuite D-107  | _                      |
|  |         |                |                                  | Address  |                        |
|  |         |                | Fort Lauderdale, FL 33309        |  |                        |
|  |         |                |                                  | City/State and Zip Code  | _                      |
|  |         |                |                                  |  |                        |
|  |         |                | E-mail address: (                | to be used for future annual report notification)              |                        |
| For fur  | ther i  | nformation co  | oncerning this matter, please co | all:   |                        |
| Gary C   | Celetti | i              |                                  |  |                        |
|  | · ·     | Name of        | f Person                         | Area Code Daytime Telephone Numb                               | <u></u>                |
| Enclos   | ed is   | a check for th | ne following amount:             |  |                        |
| <b>■ \$</b> 2  | 5.00    | Filing Fee     |                                  | Certified Copy Certific (additional copy is enclosed) Certific | ate of Status & d Copy |
|  |         |                |                                  |  |                        |
|  |         |                |                                  | Division of Corporations                                       |                        |
|  | P.      | O. Box 632     | .7                               | The Centre of Tallahassee                                      | <b>810</b>             |
|  | Ta      | allahassee, l  | FL 32314                         | 2415 N. Monroe Street, Suite                                   | 010                    |

Tallahassee, FL 32303

## **ARTICLES OF AMENDMENT** ARTICLES OF ORGANIZATION E E E

PROGRESSIVE AVIATION GROUP LLC

AVIATION GROUP LLC 2022 JUN 21 AM 6: 57

(Name of the Limited Liability Company as it now appears on our records.)

If Changing Registered Agent, Signature of New Registered Agent

| The Articles of Organization for this Limited Liab Florida document number 84-4201922  | Florida Limited Liability Company)      | GEORETHAY OF STATE                          |
|--|---|---|
| The Articles of Organization for this Limited Liab   | oility Company were filed on 12/2       | and assigned                                |
| Florida document number 84-4201922   | ·                                       |   |
| This amendment is submitted to amend the follow  |   |   |
| A. If amending name, enter the new name of the   | he limited liability company her        | <u>e</u> :                                  |
| The new name must be distinguishable and contain the work  | ds "Limited Liability Company," the des | ignation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicab   | ole:                                    |   |
| (Principal office address MUST BE A STREET.  | ADDRESS)                                |   |
|  |   |   |
| Enter new mailing address, if applicable:  |   |   |
| (Mailing address MAY BE A POST OFFICE BO   |   |   |
| Maung agures MAT BE A FOST OFFICE BO   | <u></u>                                 |   |
| B. If amending the registered agent and/or reg<br>agent and/or the new registered office address in<br>Name of New Registered Agent: |   | cords, enter the name of the new registered |
| New Registered Office Address:   | Pater Floris                            | la street address                           |
|  |   |   |
|  | City                                    | , Florida<br>Zip Code                       |
| New Registered Agent's Signature, if changing Reg  |   | ap con                                      |
|  |   |   |

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>           | Type of Action |
|--------------|-------------------------|--------------------------|----------------|
| MGR          | WHYMNS, BARTOVIA        | 9372 EQUUS CIRCLE        | □ Add          |
|              |                         | BOYNTON BEACH, FL 33472  | ≅Remove        |
|              |                         |                          | ☐ Change       |
| MGR SHIMON M | SHIMON MALKA            | 6030 HOLLYWOOD BLVD #130 | ■Add           |
|              |                         | HOLLYWOOD, FL 33024      | □ Remove       |
|              |                         |                          | □ Change       |
| MBR          | MBR WHYMNS AVIATION LLC | 9372 EQUUS CIRCLE        | ■ Add          |
|              |                         | BOYNTON BEACH, FL 3347   | □Remove        |
|              |                         |                          | Change         |
| MBR          | THREE TRAVEL MANAGEMEN  | 6030 HOLLYWOOD BLVD #130 | <u></u> ≣ Add  |
|              |                         | HOLLYWOOD, FL 33024      | □Remove        |
|              |                         |                          | □ Change       |
|              |                         | □Add                     |                |
|              |                         |                          | Remove         |
|              |                         | Change                   |                |
|              |                         |                          | □ Add          |
|              |                         |                          | □ Remove       |
|              |                         |                          |                |

| If am             | ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)  |
|-------------------|--|
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| If an et<br>Note: | tive date, if other than the date of filing:   |
| e reco            | rd 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 filed. |
| Dated             | Signature of a member or authorized representative of a member  Kenne H. Whyms  Typed by printed name of signee                      |
|                   | Rhu-   |
|                   | Signature of a member or authorized representative of a member   |
|                   | Kenne th Whyms Typed or printed name of signee   |

Filing Fee: \$25.00