

L200000 46627

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

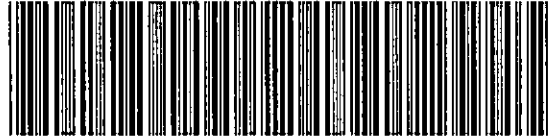
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600342273676

04/06/20--01011---028 \*\*25.00

RECEIVED  
CLERK OF COURT  
2020 APR -6 AM 9:29

QMI  
4/17/20

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Dagger Remote Aviation, 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:

Corey J. Godwin

\_\_\_\_\_  
Name of Person

Dagger Remote Aviation

\_\_\_\_\_  
Firm/Company

330 Bluefish Dr. Unit 229

\_\_\_\_\_  
Address

Fort Walton Beach, FL

\_\_\_\_\_  
City/State and Zip Code

corey.j.godwin@daggerremoteaviation.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Corey J. Godwin

720 300-0313  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

Mailing Address:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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>       | <u>Address</u>          | <u>Type of Action</u>                   |
|--------------|-------------------|-------------------------|---|
| AMBR         | Tyler K. Cromeans | 36 Summerwood Cove      | <input checked="" type="checkbox"/> Add |
|              |                   | Benton, AR 71801        | <input type="checkbox"/> Remove         |
|              |                   |                         | <input type="checkbox"/> Change         |
| AMBR         | Ryan M. Walsh     | 8108 Calico Wind Street | <input checked="" type="checkbox"/> Add |
|              |                   | Las Vegas, NV 89131     | <input type="checkbox"/> Remove         |
|              |                   |                         | <input type="checkbox"/> Change         |
|              |                   |                         | <input type="checkbox"/> Add            |
|              |                   |                         | <input type="checkbox"/> Remove         |
|              |                   |                         | <input type="checkbox"/> Change         |
|              |                   |                         | <input type="checkbox"/> Add            |
|              |                   |                         | <input type="checkbox"/> Remove         |
|              |                   |                         | <input type="checkbox"/> Change         |
|              |                   |                         | <input type="checkbox"/> Add            |
|              |                   |                         | <input type="checkbox"/> Remove         |
|              |                   |                         | <input type="checkbox"/> Change         |
|              |                   |                         | <input type="checkbox"/> Add            |
|              |                   |                         | <input type="checkbox"/> Remove         |
|              |                   |                         | <input type="checkbox"/> Change         |

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record 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 record is filed.

Dated April 3, 2020

Cory J. Godin  
Signature of a member or authorized representative of \_\_\_\_\_

Signature of a member or authorized representative of a member

Corey J. Godwin

Typed or printed name of signee

**Filing Fee: \$25.00**