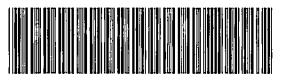
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## **COVER LETTER**

	Registration Se Division of Cor			
	FL Jet, LLC		*	
SUBJEC	T:	Name of Limi	ited Liability Company	
The encle	sed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Pļease ret	turn all correspo	ndence concerning this matter	to the following:	
		Moises Gali		
			Name of Person	
		FL Jet, LLC		
			Firm/Company	<u> </u>
		5237 Summerlin Common	s, Suite 400	
			Address	
		FT Myers, FL 33907		
			City/State and Zip Code	<del> </del>
		moises.gali@abarcahealth.c		
		E-mail address: (	to be used for future annual report no	tification)
For furth	er information c	oncerning this matter, please co	all:	
Moises (	Gali		787 246-9076	
	Name o	f Person	Area Code Daytii	me Telephone Number
Enclosed	is a check for th	ne following amount:		
<b>\$25.</b> 0	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 Addres		Street Address: Registration S	ection
Registration Section Division of Corporations			Division of Co	orporations
	P.O. Box 632	27	The Centre of	
	Tallahassee.	FE 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FL Jet, LLC		
( <u>Name of the Limited Liability C</u> (A Florida Li	Company as it now appears on our records.) mited Liability Company)	
he Articles of Organization for this Limited Liability Con	npany were filed on December 2, 2020	and assigned
lorida document number 1.20000365773		_
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited	d liability company here:	
he new name must be distinguishable and contain the words "Limited	I Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES	<u> </u>	
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		-
Hadding that SEATOST OFFICE BOAT		
B. If amending the registered agent and/or registered ogent and/or the new registered office address here:	ffice address on our records, <u>enter the n</u>	ame of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
<del>-</del>	Enter Florida street address	
	Florida	
	City	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>	<u>Address</u>	Type of Action
MGR	Jason Borschow	5237 Summerlin Commons, Suite 400	
		FT Myers, FL. 33907	■Remove
			□Change
MGR	Moises Gali	5237 Summerlin Commons, Suite 400	<b>≣</b> Add
		FT Myers, FL. 33907	□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
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		<del></del>	· — — — — — — — — — — — — — — — — —				
					<u></u>		
			_				
ffective date, if other than the an effective date is listed, the date must ote: If the date inserted in this blocument's effective date on the December 1.	ick does not m	icet the appl	icable statuto	ing or more than	(option 90 days after trements, this	nal) filing.) Pursuant t date will not b	o 605.020 e listed a
record specifies a delayed effective is filed.	date, but not	an effective	time, at 12:0	I a.m. on the	earlier of: (b)	The 90th day	after the
January 28	<u> </u>	2021	·				
,	1 21	830					
	$\nu$ // $\sim$	· <i>''    </i>					
	Signature of a r	nember or au	thorized repres	entative of a m	ember		_

Filing Fee: \$25.00