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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	= #)
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(Do	cument Number)	
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COVER LETTER

TO: Registration Se Division of Cor		
Arc Jets, L	LC	
SUBJECT:	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing
Please return an correspo	ondence concerning this matter	to the following.
	Cameron R. Monti	
		Name of Person
	MDH Venture Capital, LL	С
		Firm/Company
	11022 Ayrshire Court	
		Address
	Woodstock, Illinois 60098	
		City/State and Zip Code
	cmonti@mdhventurecapital E-mail address: (.com to be used for future annual report notification)
For further information	concerning this matter, please co	
Cameron R. Monti	3	630 334-7605
	of Person	at () Area Code Daytime Telephone Number
········		
Enclosed is a check for	the following amount:	
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee. Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of P.O. Box 63 Tallahassee.	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Arc Jets LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{02.08.21}{1}$ and assigned Florida document number <u>L21000067570</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City 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 Lam familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if 🕏 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 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	MDH Aviation, LLC	104 Paloma Drive	≡ Add
		Coral Gables, FL 33143	□Remove
			□Change
MGR Malcoln	Malcolm D. Herzog	104 Paloma Drive	□Add
		Coral Gables, FL 33143	≡ Remove
			□Change
			□Add
			□Remove
			Change
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reffective date is listed, th	e date must be spec	itic and cannot be p	rior to date of filing o	or more than 90 days a	p tional) fler filing.) Pu	suant to 605,02
te: If the date inserted cument's effective date				iling requirements,	this date will	tot be listed!
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