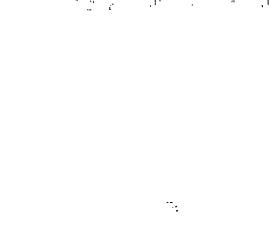
L21000260246

(Re	questor's Name)	
(110	questor s riame,	
(Ad	dress)	
(Ad	dress)	
	of Chata (Zimi (D), and a	
(Cit	y/State/Zip/Phone	7)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	Certificates o	of Status
	_	
	<u> </u>	
Special Instructions to	Filing Officer:	
		İ
	Office Use Only	5.0
		S.C. 08/18/21
		-0110100



000370579570





COVER LETTER

	egistration Sec ivision of Corp						
CUDIFCT	RRCM AIR	LLC					
SUBJECT	:	Name of Lim	ited Liability Company				
The enclos	ed Articles of A	mendment and fee(s) are sub	mitted for filing.				
Please retu	rn all correspon	dence concerning this matter	to the following:				
		Jared Gamberg					
		•	Name of Person		-		
		Gamberg & Abrams					
			Firm/Company		-		
		4651 Sheridan St., Ste 200					
			Address		~		
		Hollywood, FL 33021					
			City/State and Zip Code		-		
		jaredgamberg@gamberglaw					
			to be used for future annual report no	tification)			
For further	information co	ncerning this matter, please co	all:		~ - :		
Jared Gam	berg		954 981-4411			(47
	Name of	Person	at () Area Code Dayti	me Telephone Numbe	<u> </u>	•	
						•	
Enclosed is	a check for the	following amount:			12	1	
€ \$25.00	Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &	J	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RRCM AIR LLC		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co.	mpany were filed on 06/03/2021	and assigned
Florida document number J21000260246	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed 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 ADDRE	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		7
B. If amending the registered agent and/or registered eagent and/or the new registered office address here:	office address on our records, enter the na	me of the new registe
agent and of the new registered office address here.		~
Nama of Naw Pagistared Agents		•
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	<u> </u>
New Registered Office Address:		- i i-
	Enter Florida street address	
	, Florida _	\sim
	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 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>	Address	Type of Action
MGR	MIGUEL MOURIZ	13650 NW 107 AVE	□ Add
		HIALEAH GARDENS, FL 33018	■Remove
			□Change
			□ Add
			□Remove
			□Add
			- □ Remove
		7	□Change
			∆dd
			Remove
			\(\sigma\) □Change
			□Add
			□Remove
			□ Change
		-	□Add
			□Remove
			□Change

	
 	
<u> </u>	
	— /
	(
	•
f.\(\gamma\)	
	
<u> </u>	<u>.</u>
 11: 2	****

Filing Fee: \$25.00