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(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
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Certified Copies Certificates of Status
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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 11/01/2021	-	ANTI/ATE/ TAN
ENTERN NAME Aero V	/orld LLC	<i>≃WALK IN</i>
ENTITY NAME Aero V	VOIIG ELC	
DOCUMENT NUMBER_		
	PLEASE FILE THE ATTACHED AND RETURN	
xxxxxx	Plain Copy	
	Certified Copy	
	Certificate of Status	
	Certified Copy of Arts & Amendments Certificate of Good Standing	
	APOSTILLE' / NOTARIAL CERTIFICATION	
COUNTRY OF DESTINAT	TION	
NUMBER OF CERTIFICA	TES REQUESTED	
TOTAL OWED \$25	ACCOUNT #: I20160000	072
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Please call Tina at ti		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Company as it now appears on our recording telegraphic Liability Company)	rds.)					
mpany were filed on	and assigned					
nis amendment is submitted to amend the following:						
ed liability company here:						
ed Liability Company," the designation "LL	C" or the abbreviation "L.L.C."					
<u></u>	To the same					
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	7					
office address on our records, <u>ente</u>	r the name of the new regis					
Enter Florida street addre	PNN					
	lorida Ziv Code					
	Enter Florida street address.					

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>	Address	Type of Action
AMBR	Kedar Mohile	434 Luna Bella Lane Apartment 266	□Add
		New Smyrna Beach, FL 32168	≡ Remove
		US	□Change
			□Add
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ffective date, if other than the an effective date is listed, the date in ote: If the date inserted in this occument's effective date on the	block does not me	et the applicable	e of filing or more the statutory filing rec	(option) an 90 days after fil uirements, this d	al) ing.) Pursu ate will n	ant to 605.0 ot be listed
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