L21000382948

(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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2021 OCT 21 PW 1: 20 SECRETARY OF STATE

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Corporations		•	
SIR JETS L	LLC		•
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	LORENA MONTIEL		
		Name of Person	s
	RICH&GRACE TAX AN	D ACCOUNTING LLC	
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	13303 JADE GARDEN D	R BLDG 12 # 207	
	•	Address	
	ORLANDO FL 32824		
		City/State and Zip Code	
	LMONTIEL@RICHANDO		
		to be used for future annual report not	fication)
For further information c	oncerning this matter, please c	ail:	
ALEJANDRO PATINO		407 7563140 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne 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 Fiting Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address: Registration Se	ction
Registration S Division of C		Division of Cor	
P.O. Box 632	•	The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2021 OCT 21 PM 1: 20

SIR JETS LLC		7,70,10	1 / 10/1 0 / 10/2
(Name of the Limit	d Liability Com A Florida Limite	pany as it now appears on our records.) d Liability Company)	. !
The Articles of Organization for this Limited Li Florida document number L21000382948	ability Compar	ny were filed on 08/26/2021	and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited lia	ability company here:	
SIR JETS AVIATION LLC			
The new name must be distinguishable and contain the w	ords "Limited Lia	bility Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applica	ıble:	N/A	
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE I	BOX)		
			
B. If amending the registered agent and/or reagent and/or the new registered office addres	~	e address on our records, enter the	name of the new registered
Name of New Registered Agent:	N/A		
New Registered Office Address:		Enter Florida street address	
		Florid	a

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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>	Name	Address	Type of Action
	N/A		□ Add
			□Remove
			□ Change
			□Remove
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r effecti <u>te:</u> - If i	date, if other than the date of filing:	5.0201 ted as
cord s s filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after.	er the
ed	OCTOBER 6 2021	
	Signature of a member of partnerized representative of a member	
	\mathcal{V}	

Filing Fee: \$25.00