

L210000382950

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

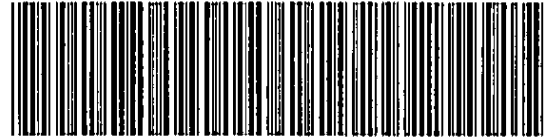
(Business Entity Name)

(Document Number)

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10/17/23--01020--006 **35.00

FILED
2023 APR 14 AM 11:43
CLERK OF STATE
OF ARIZONA

A. RAMSEY
APR 18 2023

*00789, 00524, 00671

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DMM AERONAUTICS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MAURICIO DIRRHEIMER

Name of Person

DMM AERONAUTICS LLC

Firm/Company

6115 STIRLING RD SUITE 209

Address

DAVIE FL 33314

City/State and Zip Code

MABELWUNSCHETAXES@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MABEL WUNSCHÉ

786 246-3841

at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 11, 2023

MAURICIO DIRRHIMER
6115 STIRLING RD
SUITE 209
DAVIE, FL 33314

SUBJECT: DMM AERONAUTICS LLC
Ref. Number: L21000382950

We have received your document for DMM AERONAUTICS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document that you submitted is incorrect. It is for a corporation and your entity is an LLC. I have enclosed the correct form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6823.

Annette Ramsey
OPS

Letter Number: 523A00000795

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2023 APR 14 AM 11:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DMM AERONAUTICS 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 08/26/2021 and assigned
Florida document number 1.21000382950.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

DIRRHEIMER LLC

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:

6115 STIRLING RD SUITE 209

(Principal office address MUST BE A STREET ADDRESS)

DAVIE FL 33314

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:

MABEL WUNSCHER INCOME TAX SERVICE INC

New Registered Office Address:

6115 STIRLING RD SUITE 209

Enter Florida street address

DAVIE

City

Florida 33314

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>	<u>Type of Action</u>
MGR	MAXIMO H DIRRHEIMER	579 LIVE OAK LN	<input checked="" type="checkbox"/> Add
		WESTON FL 33327	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
M	GUSTAVO A. DE ANGELI	579 LIVE OAK LN	<input type="checkbox"/> Add
		WESTON FL 33327	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated FEB 1ST 2023

Signature of a member or authorized representative of a member

MAURICIO N DIRRHEIMER

Typed or printed name of signee

Filing Fee: \$25.00