

121 000 459882

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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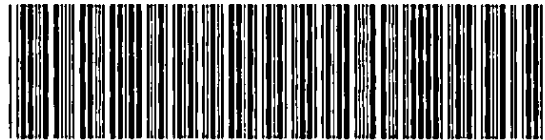
(Business Entity Name)

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T. MATTHEWS

MAR 29 2022

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DL Aviation Solutions 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:

Jeffrey Ludwig

\_\_\_\_\_  
Name of Person

Ludwig Hulsey, PA

\_\_\_\_\_  
Firm/Company

5150 Belfort Rd. S #500

\_\_\_\_\_  
Address

Jacksonville, Fla. 32256

\_\_\_\_\_  
City/State and Zip Code

dave@flyboomerang.com

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

For further information concerning this matter, please call:

Jeff Ludwig

904

281-0145

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the 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 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



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**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.

Dated March 11th, 2022

David L. Schiffman  
Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**