## 121000497904

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	(Document Number)
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TO: Amendment Section Division of Corporations		٠	• <b>K</b> E		······································

DOCUMENT NUMBER: \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

RICHARD JONES

Name of Contact Person

305 AERO SUPPLIES LLC

Firm/ Company

8400 S DIXIE HWY #1717

Address

MIAMI, FL 33143

City/ State and Zip Code

info@305aerosupplies.com

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

For further information concerning this matter, please call:

RICHARD JONES	843 ai (	809-9761
Name of Contact Person	Area Code	& Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

S43.75 Filing Fee & Certificate of Status S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF A		
TO ARTICLES OF O O	RGANIZATION	FILED
		2022 APR 19 PM 6: 35
( <u>Same of the Limited Liability Compar</u> (A Florida Limited L The Articles of Organization for this Limited Liability Company	av as it now appears on our ree inability Company) were filed on	CRETARY OF STATE
Florida document number L <u>A 1000 487804</u> .		<u> </u>
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>	,
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	.ddress on our records, <u>en</u>	ter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	ldress
		, Florida
	Ciņ	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:

1 F

## MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	<u>Address</u>	Type of Action
		·	□Add
			🖸 Remove
·		Initia	🗆 Add
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D. If amending any other information, enter change(s) here: (44ach additional sheets, if necessary.)

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## 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) <u>Note:</u> 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 J2 Apr Signature of a member or authorized representative of a member-Typed or printed name of signee





2022 APR 19 AM 2:06

FLORIDA DEPARTMENT OF STATE Division of Corporations C STATE E.FL

February 22, 2022

RICHARD JONES 8400 S DIXIE HWY #1717 MIAMI, FL 33143

SUBJECT: 305 AERO SUPPLIES LLC Ref. Number: L21000487804

We have received your document for 305 AERO SUPPLIES LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 422A00004295

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