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## **COVER LETTER**

. TO:

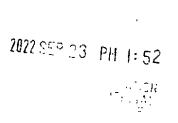
Tallahassee, FL 32314

	istration Sec sion of Cor		·	
SUBJECT:	LCR AVIA	TION SUPPORT LLC		
OUDJECT;		Name of Lim	ited Liability Company	
The enclosed	Articles of a	Amendment and fee(s) are sub	mitted for filing.	
lease return	all correspon	ndence concerning this matter	to the following:	
		CARLOS A RIVERA		
			Name of Person	
			Firm/Company	
		12711 RAFTSMEN COUL	RT	
		ORLANDO, FL 32828	Address	
		carlosrd8204@gmail.com	City/State and Zip Code	
or further in	formation co	E-mail address: ( oncerning this matter, please of	to be used for future annual report not all:	ification)
CARLOS A	RIVERA		954 851 2973	
	Name of	Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a	check for th	e following amount:		
<b>■ \$25.00</b> F	iling 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)
	ling Address		<u>Street Address:</u> Registration Se	ection
Div		orporations	Division of Co	rporations
r.O	. DOX 032	<i>I</i>	The Centre of T	rananassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810





August 12, 2022

CARLOS A RIVERA 12711 RAFTSMEN COURT ORLANDO, FL 32828

SUBJECT: LCR AVIATION SUPPORT LLC

Ref. Number: L22000119708

We have received your document for LCR AVIATION SUPPORT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

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) 245-6052.

Neysa Culligan Regulatory Specialist III

Letter Number: 322A00018031

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

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LCR AVIATION SUPPORT LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

TALLAHASSEE, FI

The Articles of Organization for this Limited Liability (	Company were filed on 03/09/2022	and assigned
Florida document number L22000119708	Sompany next men on	
Florida document number	<del></del> *	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
CR AVIATION SUPPORT LLC		
The new name must be distinguishable and contain the words "Lii	mited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		. <u></u>
B. If amending the registered agent and/or registere	· · · · · · · · · · · · · · · · · · ·	he name of the new register
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Willee Address.	Enter Florida street address	
	Flo	rida
	City	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 stantes 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:

The state of the s	•		
MGR = Manager			
AMBR = Authorized Member			

<u>Title</u>	<u>Name</u>	Address	Type of Action
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