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Office Use Only

A. RIVERS

OCT 2 1 2023

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: RtA Alackoft CLC 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:
Tanja Rodeigner Name of Person
Firm/Company
1313 Sw Geagoll way
Palm Otty FL 34990 City/State and Zip Code
Rayboots Service & small com Email address: (to be used for luture annual report notification)
For further information concerning this matter, please call:
tania Rodriguez at 407 462-660 Name of Person at 407 462-660 Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Solution Status Solution Status Solution Solutio

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RtA Air Chart	14C	
(<u>Name of the Limited Liability</u> (A Florida	Company as it now appears on ou Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liability Co. Florida document number <u>L 22000 3527</u>		10 2022 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit PHA AIRCRAFT GERU The new name must be distinguishable and contain the words "Limit		on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	$\frac{13 3}{ 04 m}$	City J-L 34 990
Enter new mailing address, if applicable:		. 2
(Mailing address MAY BE A POST OFFICE BOX)		
		38 O
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records	enter the name of the new registered
Name of New Registered Agent:		·
New Registered Office Address:	Enter Florida stree	t address
		Florida
	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 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:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
			□ Add
			□Remove
			□Change
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			□Change
			□Add

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D. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an eilte <u>Note:</u>	(optional) ctive 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) of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nt's effective date on the Department of State's records.
f 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 d.
Dated _	
	Signature of a member of authorized representative of a member Typed or printed name of signee