## 122000311730

	(Requestor's Name)
	(Address)
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	(City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
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<del></del>	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
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Special Instructions to	Siling Officer
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Office Use Only



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LLC amend

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2022 SEP -6 AM 10: 49 2022 SEP -6 AM 10: 38

A. RAMSEY SEP - 6 2022

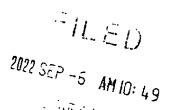
## **COVER LETTER**

.

	Registration Se Division of Cor			
eun irz		Y COIN LLC		
SUBJEC	.1:	Name of Lim	ited Liability Company	_
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	indence concerning this matter	to the following:	
		GUILLERMO LONDONO	O ASSELIN	
			Name of Person	_
		AIRBC FLY COIN LLC		
		···	Firm/Company	
		7500 NW 25TH ST SUITI	E 237	
		<del></del>	Address	
		DORAL, FLORIDA 3312	2	
			City/State and Zip Code	
		INFO@JCBSOLUTIONSI	NC.NET to be used for future annual report notification)	_
For furth	er information c	oncerning this matter, please c		
GUILLE	ERMO LONDO	NO ASSELIN	866 296-1833	
	Name o	f Person	Area Code Daytime Telephone Num	ber
Enclosed	I is a check for th	ne following amount:		
□ \$25.i	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certif (additional copy is enclosed) Certif	Filing Fee, icate of Status & ied Copy anal copy is enclosed)
	Mailing Addres Registration 5		Street Address: Registration Section	
	Division of C	Corporations	Division of Corporations	
	P.O. Box 632 Tallahassee, 1		The Centre of Tallahassee 2415 N. Monroe Street, Suite	e 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



AIRBC FLY COIN 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 v	were filed on FLO	RIDA 8-31-22	and assigned
Florida document number L22000377930			
This amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited liability company here:			
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the des	signation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:			
(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 as agent and/or the new registered office address here:  Name of New Registered Agent:		cords, <u>enter the nam</u>	
New Registered Office Address:	Enter Florid	la street address	
		, Florida	Zip Code
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as pabeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of n rovided for in Cl	ny duties, and I am hapter 605, F.S. Or,	familiar with and if this document is
If Chan;	ging Registered Agei	nt, Signature of New Re	gistered 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>	Type of Action
AMBR	Guillermo L Asselin	7500 NW 25TH ST SUITE 237	□Add
		DORAL, FL 33122	<b>≣</b> Remove
			□Change
AMBR	Guillermo Londono-Asselin	7500 NW 25TH ST SUITE 237	<b>=</b> Add
		DORAL, FL 33122	□Rетоvе
			□Change
AMBR	Juliana A. Escobar	7500 NW 25TH ST SUITE 237	□Add
		DORAL, FL 33122	■Remove
			□Change
AMBR	Juliana Angel-Escobar	7500 NW 25TH ST SUITE 237	■Add
		DORAL, FL 33122	□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
		<del></del>	Remove
			□Change

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Filing Fee: \$25.00