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(Requestor's Name)
(Address)
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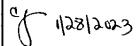
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COVER LETTER

TO: Registration S Division of Co			
X05 Aviat	ion LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Christopher J Heinberg		
		Name of Person	
		Finn/Company	<u> </u>
	1712 W Morrison Ave		
		Address	
	Tampa, FL 33606		
	jach@theaxiomgrp.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report noti-	fication)
For further information	concerning this matter, please c	all:	
Kimberly Blake		813 735-8155 at ()	
Name	of Person	Area Code Daytime	e 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 Addre Registration		Street Address: Registration Sec	ction _

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

X05 Aviation LLC

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(Name of the Limit	ed Liability Compa (A Florida Limited	inv as it now appears on our rec Liability Company)	TALLAHASSEE, FL	
The Articles of Organization for this Limited Li				
Florida document number L22000438820				
This amendment is submitted to amend the follo				
A. If amending name, enter the new name of	the limited liab	ility company here:		
XO5 Aviation LLC				
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "	LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if application	able:	N/A		
(Principal office address MUST BE A STREE	T ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE)	BOX)			
	<u>-</u>			
B. If amending the registered agent and/or r agent and/or the new registered office addres Name of New Registered Agent:		address on our records. <u>en</u>	ter the name of the new register	
New Registered Office Address:				
		Enter Florida street address		
			Florida	
		Cmy	Zip Code	
New Registered Agent's Signature, if changing I	Registered Agent:			
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as regibeing filed to merely reflect a change in the company has been notified in writing of this	er and complete stered agent as registered office	performance of my duties provided for in Chapter 60	e, and I am familiar with and 05, F.S. Or, if this document is	
	If Cha	nging Registered Agent, Signatu	ire of New Registered 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>	Address	Type of Action
		N/A	□Add
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			⊡Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			☐ Change
			□ Add
		·	□Remove
			[] Changa

	N/A
Effec	tive date, if other than the date of filing: (optional)
(If an e	etive date, if other than the date of filing:
(If an e	ffective 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to
(If an e	etive date, if other than the date of filing:
(If an e <u>Note</u> docu	ffective 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 is If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a ment's effective date on the Department of State's records.
(If an e <u>Note</u> docu	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 is If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as iment's effective date on the Department of State's records. Ord 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
(If an e Note documents the reco	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 is If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a ment's effective date on the Department of State's records. For the 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 filed.
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Filing Fee: \$25.00