1/27/23, 11.32 AM

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : POPPI ENTERPRISES & TECHNOLOGY LLC

Account Number : I20210000079 Phone : (754)215-9616 Fax Number : (754)264-8289

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*\*

Email Address:\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LOV AIRCRAFT MAINTENANCE LLC

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JAN 30 2023

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## **COVER LETTER**

TO: Registration So Division of Cor		1	
LOV AIRO	CRAFT MAINTENANCE LLO		·
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ROBERTA HATANO SE	LVA	
		Name of Person	**************************************
	POPPI ENTERPRISES &	TECHNOLOGY LLC	
		Firm/Company	<del></del>
	6810 N STATE ROAD 7	SUITE 132	
		Address	
	6810 N STATE ROAD 7	SUITE 132	
		City/State and Zip Code	
	poppiconsulting@gmail.co l:-mail address: (	m to be used for future annual report no	otification)
For further information c	oncerning this matter, please c	all:	
Roberta Silva		754 215 9616	
Name o	n' Person	at () Area Code Dayti	ime Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<ul> <li>S60.00 Filing Fee, Certificate of Status &amp; Certified Copy (additional copy is enclosed)</li> </ul>
Mailing Address		Street Address:	oction.
Registration 5 Division of C		Registration S Division of Co	
P.O. Box 632		The Centre of	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LOV /	AIRCRAFT MAINTENANCE LL	C	
(Name of the Limited	Liability Company as it now appear Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liabi Florida document number	· · · · · · · · · · · · · · · · · · ·	01/06/2023	and assigned
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of th	e limited liability company bo	<u>ere</u> :	
The new name must be distinguishable and contain the word	s "Lumted Liability Company," the d	esignation "LLC" or the	abbreviation "L L.C "
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET)	ADDRESS)	<u> </u>	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO	•		
B. If amending the registered agent and/or registered office address h		ecords, <u>enter the na</u>	-
			2623
Name of New Registered Agent:			
New Registered Office Address:			- <del> </del>
	Enter Flor	ida street address , Florida	7 :: :
-	City	, Fabrida _	- : Zip Gede
New Registered Agent's Signature, if changing Regi	istered Agent:		<b>c</b>
I hereby accept the appointment as registered a provisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the reg company has been notified in writing of this cha	ind complete performance of red agent as provided for in C istered office address. I herel	my duties, and Lam Hapter 605, F.S. Oi	familiar with and r, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person-being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

To:

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	ANA NATALIA S BENJAMIN	250 W SAMPLE RD # B122	■Add
		DEERFIELD BEACH, FL 33064	
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		<del></del>	🖸 Add
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From: Roberta Silva

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he record specifies a dela ord is filed	ayed effective date, but not an e	effective time, at 12:01 a	am on the earlier of (b). The	90th day after the
Dated	JANUARY 27 2	023		
	·	CIZAT DEL VARGAS		
		AV 41 A27 1 4100 C		

Typed or printed name of signee