# L23 0000 19041



Office Use Only



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## **COVER LETTER**

| TO: Registration S Division of Co | rporations                                   |   |  |
|-----------------------------------|--|---|--|
| SUBJECT:                          | WORLA AIR. Name of Lin                       | CLAKT SERVICE-<br>nited Liability Company                           | CARGO LLC  |
| The enclosed Articles of          | Amendment and fee(s) are sub                 | omitted for filing.   |  |
| Please return all correspond      | ondence concerning this matter               | to the following:   |  |
|                                   |  | Name of Person  |  |
|                                   |  | Firm/Company  |  |
|                                   | 2324 SE                                      | LIBERATOR LA  | NE, Suite 10f  |
|                                   |  | 7 FL 34996 City/State and Zip Code                                  |  |
|                                   | E-mail address: (                            | to baused for future annual report no                               | RCRAFTSERVICES-COM   |
| For further information c         | oncerning this matter, please c              | all;  |  |
| SRIA<br>Name o                    | H ZECHER f Person                            | at (609) 577 -<br>Area Code Daytin                                  | 2230<br>ne Telephone Number  |
| Enclosed is a check for the       | ne 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 Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address: 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

| WORLS AIRCRAFT   | SERVICES CARGO LLC   |
|--|--|
| ( <u>Name of the Limited Liability Compa</u><br>(A Florida Limited   | SERVICES CARGO LLC  any as it now appears on our records.)  Liability Company)                   |
| The Articles of Organization for this Limited Liability Company  |  |
| Florida document number <u>L 230000 / 904/</u>   | , ,  |
| This amendment is submitted to amend the following:  |  |
| A. If amending name, enter the new name of the limited liab  | pility company here:   |
| The new name must be distinguished.  |  |
| The new name must be distinguishable and contain the words "Limited Liabil   | lity Company," the designation "LLC" or the abbreviation "L.L.C."                                |
| Enter new principal offices address, if applicable:  |  |
| (Principal office address MUST BE A STREET ADDRESS)  |  |
|  | SECULATION ACTIONS   |
|  |  |
| Enter new mailing address, if applicable:  | 5  |
| (Mailing address MAY BE A POST OFFICE BOX)   | 0 P  |
|  | SC P   |
|  |  |
| B. If amending the registered agent and/or registered office a<br>agent and/or the new registered office address here:   |  |
| The state of the s |  |
| Name of New Registered Agent:  | 14   |
| New Registered Office Address: 2324  | SE LIBERATOR LANE SUITE 10 F  Enter Florida street address  TUART , Florida 34996  City Zip Code |
| ۲  | and a secondary cos  |
|  | City Florida 34996   |

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 Changing Registered Agent, Signature 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 |
|--------------|-------------|-------------|----------------|
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|              | N/A         |             | □Remove        |
|              |             |             | Change         |
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|              |             |             | Change         |

|                                     | ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)   |
|-------------------------------------|---|
| ~ 1/ <del></del>                    | MORE: JOSHUA FLETCHER AND BRIAN ZECHER<br>(1) AMBR ABBRESS TO:  |
|                                     | 2324 SE LIBERATOR LANC, SUITE 104   |
|                                     | STUART, FL 34996  |
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| lf an effectiv<br><u>Note:</u> If t | date, if other than the date of filing:  ve 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the seffective date on the Department of State's records. |
| e record sp<br>rd is filed.         | pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the   |
| Dated                               | August 19 2024  |
|                                     | August 19 2024  Briank Lecher  Signature of a member or authorized representative of a member   |
|                                     | BRIAN I. ZECHER   |
|                                     | Typed or printed name of signee   |

Filing Fee: \$25.00