## L2300062628

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
(,
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

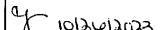
Office Use Only



400417509084

10 18.0, -01011--025 \*\*25.00





## **COVER LETTER**

TO: Registration Section Division of Corpo			i
SUBJECT:	AVIATION Rea	ited Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	$\wedge$
		ent Leeve	~ · d
		Name of Person	<del> </del>
		Firm/Company	
	Po B	0). 1476 G	20019 PL 344 10
	Ocal	a FL 344	78
	Kl	City/State and Zip Code  QUUCK (Code)	(cm
	_	to be used for future annual report notifi	cation)
For further information con	cerning this matter, please co	all: a.(352) 2\3	-4000
Name of P	erson	at \	Telephone Number
Enclosed is a check for the	following amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	<ul> <li>\$55.00 Filing Fee &amp;         Certified Copy         (additional copy is enclosed)</li> </ul>	☐ S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address	

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

	7 Y A NO MORE 2023 OCT 18 PM 4: 04
	llity Company as it now appears on our records.) da Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number	Company were filed on $\frac{\lambda}{\lambda} \frac{\lambda}{\lambda} \frac{\lambda}{\lambda} \frac{\lambda}{\lambda} \frac{\lambda}{\lambda} \frac{\lambda}{\lambda} \frac{\lambda}{\lambda}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADD	RESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, enter the name of the new register
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida

## 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
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
		<del></del>	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			□Change

—	<del></del>					
						-
				· · · · · · · · · · · · · · · · · · ·		
	<u> </u>	<u> </u>	<u> </u>	<del>_</del>		
						<del>-</del>
	<del></del>					
						<del></del>
	<del></del>					_
					<del>-</del>	
			<u> </u>	_		
					<del>-</del>	
					_	
			<del>_</del>	·	<del>-</del>	
				<u></u>		
						<del>-</del>
					-	
	<del>-</del>		<u> </u>	<u></u> _		<del>-</del>
11 0	date, if other than re date is listed, the date ne date inserted in th s effective date on th	us block does n	iot meet the applica	to date of filing or n ible statutory fili	(option one than 90 days after ng requirements, this	onal) filing.) Pursuant to 605.026 date will not be listed a
record sp	ecifies a delayed eff	ective date, but	not an effective tir	ne, at 12:01 a.m.	on the earlier of: (b)	The 90th day after th
ated	10/10		-, <del>70</del> 9,	<u>)</u> . ,	^	
	, · 	Signature	of a member or author	1002		<del>-</del>
		Signature (	i a member or author	rized representativ	= 01 a member $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$	()

Filing Fee: \$25.00