

To:

Page: 1 of 4

2024-11-14 11:39:43 UTC+14

18506176383

From: ZenBusiness User

L23000211317

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000377845 3)))



H240003778453ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC.
Account Number : I20230000190
Phone : (844)449-3624
Fax Number : (512)597-0678

2024 NOV 13 AM 8:21
TALLAHASSEE, FLORIDA

FILED

****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

AERONAUTICAL ADVISORY CENTER LLC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$25.00 |

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

1124000377845 3

To:

Page: 2 of 4

2024-11-14 11:39:43 UTC+14

18506176383

From: ZenBusiness User

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2024 NOV 13 AM 8: 21

Aeronautical Advisory Center LLC

(Name of the Limited Liability Company as it now appears on our records,
(A Florida Limited Liability Company)

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 4/28/2023 and assigned
Florida document number L23000211317.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability 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)

2337 NW 125 TH ST

Miami, FL 33167

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2337 NW 125 TH ST

Miami, FL 33167

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

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

H24000377845 3

From: ZenBusiness User

2024 NOV 13 AM 8:21
TALLAHASSEE, FLORIDA

FILED
2024 NOV 13 AM 8:21
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 11/13 2024

Signature of a member or authorized representative of a member

Typed or printed name of signee