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To:

Division of Corporations

Fax Number ; (850)617-6383

Fram:

Account Name : ML RIVERO & ASSOCIATES, LLC

Account Number : I20170000098 : (305)443-8500 Phone Fax Number : (305)444-5955

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

Email Address: mherrera@mlrivero.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AEROPART LLC

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## COVER LETTER

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TO: Registration Section Division of Corporations AEROPART LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: MANUEL RIVEO Name of Person M.L RIVERO & ASSOCIATES LLC Firm/Company 1313 BPONCE DE LEON BLVD SUITE 201 Address CORAL GABLES, FL 33134 City/State and Zip Code mrivero@mlrivero.com E-mail address: (to be used for luture annual report notitication) For further information concerning this matter, please call: MANUEL RIVERO 443-8500 Name of Person Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee ☐ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fcc. Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)

Malling 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

AEROPARTLLC			
(A Florida Limited (A Florida Limited)	nany as it now appears on our records.) d Liability Company)		
The Articles of Organization for this Limited Liability Companies of Organization for the Organization for	y were filed on JANUARY 18, 2024	and as	signed
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lig	bility company here:		
TOUCAN AERO LLC			
The new name must be distinguishable and contain the words "Limited Liab	nility Company," the designation "LLC" or the abb	reviation "L	.l.,C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:  (Mailling address MAY BE A POST OFFICE BOX)			
***		% <b>2</b>	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	).: 20 - 20 -	29	v registere
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address Ft	ှ ယ	
	. Florida		
<del></del>	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:	1		

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 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>	Name	Address	Type of Action
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Fective date, if other than the date in effective date is listed, the date must be s ote: If the date inserted in this block o coument's effective date on the Depart	of filing:  colfic and cannot be prior to date of filing or more than  ness not meet the applicable starutory filing requirement of State's records.	(optional) 90 days after filing.) Pursuant to 605.02( rements, this date will not be listed:
ecord specifies a delayed effective data is filed.	e, but not an effective time, at 12:01 a.m. on the c	earlier of: (b) The 90th day after the
ted JANUARY 26,2024	. 2:30PM	
	<i>f</i>	) /i
Signa	ture of a member or authorized representative of a final	niber 4