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10/08/24--01020--021 **25.00

2000-000

COVER LETTER

TO:

TO:	Registration So Division of Co		·			
CUD IE	AERO MARKET, LLC					
SUBJEC	-I; <u> </u>	Name of Lim	ited Liability Company			
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	eturn all correspo	ondence concerning this matter	to the following:			
		FRANCYS PADRON				
			Name of Person			
		AERO MARKET, LLC				
			Firm/Company			
		14965 SW 9TH WAY				
			Address			
		MIAMI, FL, 33194				
			City/State and Zip Code			
		aeromarket01@gmail.com				
For furth	er information of	e-mail address: (to be used for future annual report notification)			
FRANC	YS PADRON		305 458-1586			
	Name o	f Person	Area Code Daytime Telephone Number			
Enclosed	l is a check for t	he following amount:				
■ \$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)			
	Mailing Addre Registration Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	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

AERO MARKET, LLC		
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our recor Liability Company)	<u>rds.</u>)
ne Articles of Organization for this Limited Liability Company	were filed on 01/25/2024	and assigned
orida document number L24000048590		
nis amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
,		
e new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LL	.C" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	14965 SW 9TH WAY	
Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33194	200
		2074 OFFT
nter new mailing address, if applicable:	14965 SW 9TH WAY	- G
Aailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33194	g _p S
		-: :-
	<u></u>	; ' C;
. If amending the registered agent and/or registered office	address on our records, <u>ente</u>	r the name of the new regis
ent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street addr	ess
	, F	FloridaZip Code
	Cuy	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 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
MGR	Da Costa Miranda, Ricardo	4965 SW 9TH WAY	
		MIAMI, FL, 33194	□Remove
			= Change
MGR	Padron, Francys	4965 SW 9TH WAY	□Add
		MIAMI, FL. 33194	□Remove
			⊟ Change
MGR	Gomez Agiolillo, Natasha Karen	4965 SW 9TH WAY	■Add
		MIAMI, FL, 33194	□Remove
			□Change
			□Add
			□Remove
			□Change
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			□Remove
			□ Change
			□Add
			□Remove
			☐ Change

Effective date, if other than the date of filing: O9/30/2024 (optional) (an effective date is listed, the date must be specific and earnot be prior to date of filing or more than 90 days after filing.) Pursuant to 695.020 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as locument's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the dis filed. Sated SEPTEMBER 30 2024 Signature of a member or authorized representative of a member		_
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Filing Fee: \$25.00