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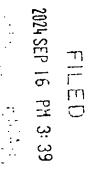
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	J. HOR SEP 18	NE 2024

Office Use Only



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09/16/24 -01023 -001 \*\*25.00



J. Kish FLORIDA DEPARTMENT OF STATE Date: 9/16/34
RECEIVED FROM: Rodrigo Da Rocha
the sum of Twenty five Dollars \$ 25.00
For the following: Amendment
4042 San Clemente Ct
N, Fort myers, FC 33917
V. Herry
for Secretary of State

## THIS MONEY PAID INTO THE STATE TREASURY

## **COVER LETTER**

	Registration Se Division of Cor			
	Onyx Avia			
SUBJEC	TT:	Name of Limi	ted 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:	
		Rodrigo Da Rocha		
			Name of Person	
		Onyx Aviation		
			Firm/Company	
		4042 San Clemente Ct		
			Address	
		North Fort Myers, FL 339	17	
			City/State and Zip Code	
		support@airsell.biz E-mail address: ()	to be used for future annual report no	otification)
For furth	ner information c	oncerning this matter, please ca		
Rodrigo	Da Rocha		786 325-5596 at ()	
	Name o	f Person	Area Code Dayti	ime Telephone Number
Enclosed	d is a check for t	he following amount:		
€ \$25.	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address:	Cartion
	Registration Division of C		Registration S Division of Co	

P.O. Box 6327 Tallahassee, FL 32314

4 - C

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2024 SEP 16 PH 3:39

Onyx Aviation LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

174 FRIII	a connect Entonity Company?	1996
The Articles of Organization for this Limited Liability C Florida document number L24000276806		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lir	nited Liability Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:	<del></del>	
(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:		e name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	da
	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 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>	<u>Address</u>	Type of Action
AMBR	Jeffrey G Kramer	150 Da Vinci Dr Nokomis, FL 34275	<b>=</b> Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
			Remove
			Change

Effective date, if other than the date of filing:  [If an effective date is listed, the date must be specific and cannable prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 ( Notes). If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as of document'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 rel is filed.  Suptember 5th  2024  Signature of a member or authorized representative of a member  Rodrigo Da Rocha.						
Effective date, if other than the date of filing:  (aptional)  If an effective date is listed, the date must be specific and connot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 ( Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as of document'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 rd is filed.  Dated  September 5th  2024  Signature of a member or anthorized representative of a member						
Effective date, if other than the date of filing:  If an effective date is listed, the date must be specific and connot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 0207 ( Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t document's effective date on the Department of State's records  are 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 rd is filed.  Dated  Signature of a member or anthorized representative of a member						
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Dated September 5th 2024  Signature of a member or authorized representative of a member	Note: If the c	ate inserted in this block does no	t meet the applica	to date of tiling or morable statutory filing a	(option: e than 90 days after file requirements, this day	al) ing.) Pursuant to 605.0207 ate will not be listed as
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		Signature of	a member or autho	orized representative of	a member	
	••	-		-		

Filing Fee: \$25.00