

M/2000004362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

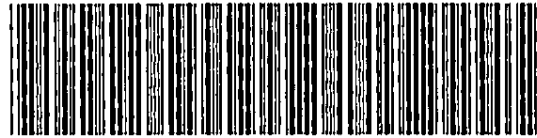
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200308417362

01/29/18 -01022--013 **25.00

S. WARREN

JAN 30 2018

18 JAN 29 PM 3:46
OFFICE OF THE CLERK
JAN 30 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Van Wagner Airships America, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ashleigh Engle

Name of Person

Alerding Castor Hewitt, LLP

Firm/Company

47 S. Pennsylvania St., Suite 700

Address

Indianapolis, IN 46204

City/State and Zip Code

aengle@alerdingcastor.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ashleigh Engle

Name of Person

at (317) 968-9456

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Van Wagner Airships America, LLC

Enter new principal office address, if applicable: 12 NW 5th Place
Williston, FL 32696
*(Principal office address
MUST BE A STREET ADDRESS)*

Enter new mailing address, if applicable: _____
*(Mailing address
MAY BE A POST OFFICE BOX)*

2. The Florida document number of this limited liability company is: M12000004362

3. Jurisdiction of its organization: Oregon

4. Date authorized to do business in Florida: 08/02/2012

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: AirSign Airships America, LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C.," or "LLC.")

6. If amending the registered agent and/or registered officer 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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

| <u>Title/ Capacity</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|------------------------|-------------|----------------|---------------------------------|
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Trevor Thompson

2A78847C910B4391

Signature of the authorized representative

Trevor Thompson

Typed or printed name of signee

11:17:00
JAN 29 PM 3:46
11:17:00

Filing Fee: \$25.00



Articles of Amendment/Dissolution - Limited Liability Company
Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - sos.oregon.gov/business - Phone: (503) 948-2000

- ☒ ARTICLES OF AMENDMENT (Complete only 1, 2, 3, 6)
- ☐ ARTICLES OF DISSOLUTION (Complete 4, 5, 6)

FILED

DEC 01 2017

REGISTRY NUMBER: 357315-87

OREGON
SECRETARY OF STATE
For office use only

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record. No must release this information to all parties upon request and it will be posted on our website.
Please Type or Print Legibly in Black Ink. Attach Additional Sheet if Necessary.

ARTICLES OF AMENDMENT ONLY

1. ENTITY NAME: Van Wagner Airships America, LLC
2. THE FOLLOWING AMENDMENT(S) TO THE ARTICLES OF ORGANIZATION IS MADE HEREBY: (State the article number(s) and set forth the article(s) as it is amended to read.)
 1. The Articles of Organization are hereby amended by striking out Article 1 thereof and replacing such Article 1 in its entirety with the following:
"Name of the Limited Liability Company: AirSign Airships America, LLC"

3. PLEASE CHECK THE APPROPRIATE STATEMENT:

- ☒ This amendment was adopted by the manager(s) without member action. Member action was not required.
Date of adoption of each amendment: 11/27/2017
- ☐ This amendment(s) was approved by the members. _____ percent of the members approved the amendment(s).
Date of adoption of each amendment: _____

ARTICLES OF DISSOLUTION ONLY

4. NAME OF LIMITED LIABILITY COMPANY: _____
5. DATE DISSOLUTION OCCURRED: _____
Future date not allowed.
6. EXECUTION: I declare as an authorized signer, under penalty of perjury, that this document does not fraudulently conceal, fraudulently obscure, fraudulently alter or otherwise misrepresent the identity of the person or any members, managers, employees or agents of the limited liability company. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment or both.

| | | |
|---------------------------------|------------------------------------|-------------------|
| Signature: <u>Patrick Walsh</u> | Printed Name: <u>Patrick Walsh</u> | Title: <u>CEO</u> |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

CONTACT NAME (To resolve questions with this filing)
Samuel J. Schmutte
PHONE NUMBER (include area code)
(317) 829-1910

AIRSIGN AIRSHIPS AMERICA, LLC



35731587-18548484

AMDART