

M13000006860

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

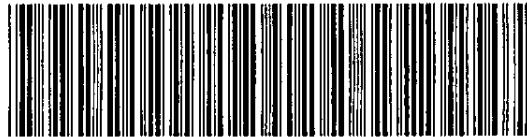
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W16-10009

Office Use Only



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02/10/16--01001--002 \*\*30.00

NOT RECORDED  
10 AM FEBRUARY 9  
SUFFICIENCY OF FILING

16 FEB -9 PM 1:52

RECEIVED

2016 FEB -9 A 8:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

FEB 12 2016  
J. BRUCE

CT

February 9, 2016

Secretary of State, Florida  
2661 Executive Circle Center  
Tallahassee FL 32301

Re: Order #: 9873535 SO  
Customer Reference 1: None Given  
Customer Reference 2: None Given

*(File 2nd)*

Dear Secretary of State, Florida :

Please obtain the following:

Aviation Leasing Associates, LLC (DE)  
Misc - Foreign LLC Filing - Amendment  
Florida

Aviation Leasing Associates, LLC (DE)  
Certificate of Status-Foreign  
Florida

*(Re: Name Change)*

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092 .

Thank you very much for your help.

Sincerely,

Connie R Bryan  
Senior Fulfillment Specialist  
Connie.Bryan@wolterskluwer.com

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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# COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Aviation Leasing Associates, 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:

Arturo Ricondo

Name of Person

Greenberg Traurig, P.A.

Firm/Company

333 SE 2nd Avenue

Address

Miami, Florida 33131

City/State and Zip Code

ricondoa@gtlaw.com

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

For further information concerning this matter, please call:

Arturo Ricondo

at (305) 579-7853

Name of Person

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

CR2E055 (9/15)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**SECTION I (I-4 must be completed)**

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

State: Aviation Leasing Associates, LLC

Enter new principal office address, if applicable: \_\_\_\_\_

(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: M13000006860

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: October 24, 2013

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

5. New name of the limited liability company: Cölchester Aviation, 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

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SECRETARY OF FINANCE  
TALLAHASSEE, FLORIDA

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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:

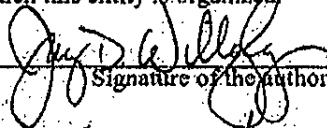
\_\_\_\_\_

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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20 FEB -  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

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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

  
 \_\_\_\_\_  
 Signature of the authorized representative

JERRY D. WILLoughBY  
 \_\_\_\_\_  
 Typed or printed name of signee

Filing Fee: \$25.00

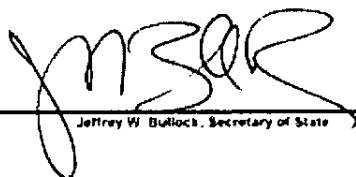
# Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "AVIATION LEASING ASSOCIATES, LLC", FILED A RESTATED CERTIFICATE, CHANGING ITS NAME TO "COLCHESTER AVIATION, LLC" ON THE NINETEENTH DAY OF FEBRUARY, A.D. 2014, AT 6:45 O`CLOCK P.M.



  
Jeffrey W. Bullock, Secretary of State

5409680 8320  
SR# 20160731036

Authentication: 201812062  
Date: 02-10-16

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)