M18000004864

(Requestor's Name)
(Address)
(133,213)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certified copies Certificates of Status
Special Instructions to Filing Officer:





300318666993

09/24/18-+01016-+014 ++25.00



D RRUCE SEP 26 2018

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: D'INACIO AERO P	ARTS	LLC				
Name of Foreign I.	imited Liabi	lity Compar	ny			
Dear Sir or Madam:						
The enclosed application, certificate and fee(s) are	submitted for	or filing.				
Please return all correspondence concerning this n	natter to the f	ollowing:				
CLEITON CARDOSO						
Name of Person	<u>-</u>					
DOMINIUM CONSULTING SERVICE	ES					
Firm/Company						
6965 PIAZZA GRANDE AVE - SUITE	€ 206		•			
Address	_					
ORLANDO - FL - 32835						
City/State and Zip Code	<u>.</u>	•		No.	2018	المرادعة
SERVICES@DOMINIUMCS	.COM				2018 SEP 21	erare
E-mail address: (to be used for future annual re		ion)		SSE	+	E.A.
For further information concerning this matter, ple	ease call:			- ES-	AH 8:	(amo
CAMILA CORREA	, 407	, 374-	2329	0.0	25 \$65	
Name of Person		& Daytime	Telephone Number			•
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Registra Division P.O. Bo	NG ADDRESS: tion Section a of Corporations x 6327 see, Florida 32314			
Enclosed is a check for the following amount: \$\Boxed{1}\$ \$25 Filing Fee \$\Boxed{1}\$ \$30 Filing Fee & Certificate of Status	S55 Fili Certifie	ng Fee & d Copy	S60 Filing Fee, Certificate of S 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 appear	ars on the records of the Florida Department o	ſ
State: CALIFORNIA		
Enter new principal office address, if applicable:		
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
2. The Florida document number of this limited l	iability company is: M18000004804	
Jurisdiction of its organization: CALIFOR Date authorized to do business in Florida: 05	RNIA	
SECTION II (5-9 complete only the applicable	e changes)	
(If name unavailable, enter alternate name adopte copy of the written consent of the managers or must contain "Limited Liability Company," "L.L.	nanaging members adopting the alternate name	lorida and attach a
6. If amending the registered agent and/or registered agent and/or the new registered office	address here:	name of the new ?
Name of New Registered Agent: New Registered Office Address:	<u> </u>	20 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
New Negistered Office (Judies).	Enter Florida Street Add	ress
_	, Florida	Zip Code
	City	zip Code
New Registered Agent's Signature, if changing Is I hereby accept the appointment as registered age the provisions of all statutes relative to the proper and accept the obligations of my position as region document is being filed to merely reflect a chang liability company has been notified in writing of	gent and agree to act in this capacity. I further er and complete performance of my duties, an istered agent as provided for in Chapter 605, ge in the registered office address. I hereby co	d I am familiar with F.S. Or, if this

If the amendment	changes person, title or capacity in a	accordance with 605.0902 (1)(e), indicate tha	t change:
le/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			Remove
			Add
			Remove
			2018 SEP
			Remove 8: 25
			Remove
			Add
			Remove
aforementioned	er the law of which this entity is org	by the official having custody of records in the	ie

Filing Fee: \$25.00

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: AMERICAN ALL PARTS LLC

FILE NUMBER: FORMATION DATE:

201428210346

TYPE:

10/06/2014
DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of August 31, 2018.

ALEX PADILLA Secretary of State



Secretary of State Amendment to Articles of Organization of a Limited Liability Company (LLC)

LLC-2

IMPORTANT — Read Instructions before completing this form.

Filing Fee - \$30.00

Copy Fees - First page \$1.00; each attachment page \$0.50; Cartification Fee - \$5.00

Note: You must file a Statement of Information (Form LLC-12), to change the business address(es) of the LLC or to change the name or address of the LLC's manager(s) and/or egent for service of process, which can be filed online at

FILED Secretary of State State of California AUG 1 4 2018 000

icc

bizfile.sos.ca.gov.	Above Space For Office Use Only
1. LLC Exact Name (Enter the exact name on file with the California Secretary of State.)	
D'INACIO AERO PARTS LLC	106
2. LLC 12-Digit Entity (File) Number (Enter the exact 12-digit Entity (File) Number Isa	sued by the California Secretary of State.)
201428210346	
New LLC Name (If Amending) (See Instructions – List the proposed LLC name example (Secretary of State.)	ctly as it is to appear on the records of the California
AMERICAN ALL PARTS LLC	
4. Management (If Amending) (Select only one box)	
The LLC will be managed by:	
One Manager More than One Manager	All LLC Member(s)
5. Purpose Statement (Do not alter Purpose Statement.)	
The purpose of the limited liability company is to engage in any lawful act of may be organized under the California Revised Uniform Limited Liability Comp	or activity for which a limited liability company pany Act.
6. Additional Amendment(s) set forth on attached pages, if any, are incorporated by LLC-2. (All attachments should be 8½ x 11, one-sided, legible and clearly marked as	orated herein by reference and made part of this an attachment to this form LLC-2.)
Signature	
By signing, I certify that the information is true and correct and that I am author	orlzed by California law to sign.
Holaino FLAVIO	RIBEIRO
Sign here Print you	ur name here