

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000177013

Entity Name: 1848 AVIATION PARTNERS LLC**Current Principal Place of Business:**1221 BRICKELL AVENUE, SUITE 2600
MIAMI, FL 33131**Current Mailing Address:**1221 BRICKELL AVENUE, SUITE 2600
MIAMI, FL 33131**FEI Number:** 30-0805931**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	1848 CAPITAL PARTNERS LLC
Address	1221 BRICKELL AVENUE, SUITE 2600
City-State-Zip:	MIAMI FL 33131

Title	CEO, DIRECTOR
Name	DAGROSA, JOSEPH
Address	1221 BRICKELL AVENUE, SUITE 2600
City-State-Zip:	MIAMI FL 33131

Title	CFO
Name	TOLZIEN, JAMES R.
Address	1221 BRICKELL AVENUE, SUITE 2600
City-State-Zip:	MIAMI FL 33131

Title	DIRECTOR
Name	SICILIAN, JOHN
Address	1221 BRICKELL AVENUE, SUITE 2600
City-State-Zip:	MIAMI FL 33131

Title	DIRECTOR
Name	NIETHARDT, DAVID
Address	1221 BRICKELL AVENUE, SUITE 2600
City-State-Zip:	MIAMI FL 33131

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES R. TOLZIEN**AUTHORIZED SIGNOR****05/01/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date