# P23000040745

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#### **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	TION:AEROV	VISE CONSULTING COR	P	
DOCUMENT NUMBE	R:	P23000040795		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspondence	ondence concerning this ma	tter to the following:		
	AN	AIS AYBAR MORALES		
_	· Oriur	Name of Contact Person	1	
		Firm/ Company		
	8249 NW 36T	H ST, STE 121		
<del></del>		Address		•
		DORAL, FL 33166		
_		City/ State and Zip Cod	e	
	aerowisec	onsultingcorp@gmail.com		
_	E-mail address: (to be u	sed for future annual report	notification)	
	concerning this matter, plea	se call:	. 833-0149	211 523
		at (	de & Daytime Telephone Numbe	: 2
Name of	Contact Person	Area Co	de & Daytime Telephone Numbe	
Enclosed is a check for t	he following amount made	payable to the Florida Dep	artment of State:	. =====================================
\$35 Filing Fee	L .\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	1. I. S. J.
Ameno Divisio	ng Address  Iment Section on of Corporations ox 6327	Ameno Divisio	Address Iment Section on of Corporations entre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

#### Articles of Amendment to Articles of Incorporation of

### AEROWISE CONSULTING CORP

## (Name of Corporation as currently filed with the Florida Dept. of State)

P23000040795		
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the follits Articles of Incorporation:	owing amendm	ent(s)
A. If amending name, enter the new name of the corporation:		
	The nev	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbre "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must c "chartered," "professional association," or the abbreviation "P.A."	viation "Corp., ontain the word	" d
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
<del></del>		
<del></del>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:		636
ANAIS AYBAR MORALES		9093 KUC 24
Name of New Registered Agent	;	( ) ( )
8249 NW 36TH ST, STE 121  (Florida street address)		<u>;</u>
DODA!	166	مست. مست
New Registered Office Address: DORAL , Florida , Florida (City)	(Zip Code) _	Ö
	72	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the posi	tion.	
Signature of New Registered Agent, if changing		
Signature of Yew Registered Agent, if changing		

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President. Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P	DIEGO I TERUEL	10155 NW 27TH TERRACE
Add			DORAL, FL 33172
X Remove			
2) Change	VP	LILIAN T VARGAS	10155 NW 27TH TERRACE
Add		<del></del>	DORAL, FL 33172
X Remove	_		10155 NW 27TH TERRACE
3 ) Change	<u>P</u>	HATUEY TAVARES OLMOS	DORAL, FL 33172
X Add			. ~3 
Remove	L/D	ANAIC AND AD MODALEC	10155 NW 27TH TERRACE
4) Change	VP	ANAIS AYBAR MORALES	
X Add			DORAL, FL 33172
Remove			
5) Change		<u> </u>	<u> </u>
Add			
Remove			
6) Change		<del></del>	
Add			
Remove			

an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (If not applicable, indicate N/4)	amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)		
an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate NA)				
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The date of each amendment(s) adoption: date this document was signed.		, ii other than
08/11/2023		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing requirements, this date v of State's records.	vill not be listed as
Adoption of Amendment(s)	CHECK ONE)	
☐ The amendment(s) was/were adopted by t action was not required.	he incorporators, or board of directors without shareholder action a	nd shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficient f	he shareholders. The number of votes cast for the amendment(s) or approval.	
	the shareholders through voting groups. The following statementing group entitled to vote separately on the amendment(s):	
"The number of votes cast for the ar	nendment(s) was/were sufficient for approval	
by	11002 6/.	
(	voting grhup)	
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Dated 11- Gas	my sow	
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Signature -	rm	
selected, by an i	resident or other efficer – if directors or officers have not been neorporator – if in)the hands of a receiver, trustee, or other court ary by that fiduciary)	<i>y</i>
HATUE	Y TAVARES OLMOS	2028 Alie 21
	(Typed or printed name of person signing)	
PRESID	ENT	12
	(Title of person signing)	=