2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000033138 Entity Name: BHMS AIR, LLC

Current Principal Place of Business:

101 ALMERIA AVENUE MIAMI. FL 33134

Current Mailing Address:

101 ALMERIA AVENUE MIAMI, FL 33134 US

FEI Number: 20-8775393 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEON, MARIANA 101 ALMERIA AVENUE MIAMI, FL 33134 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: MARIANA LEON 03/07/2024

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR Title MGR

GQBHMS AIR CHARTERS LLC Name Name CMBHMS AIR CHARTERS LLC

101 ALMERIA AVE 11755 SW 90TH STREET Address Address

SUITE 210

FILED Mar 07, 2024

Secretary of State

6756945228CC

Date

Date

MIAMI FL 33134 City-State-Zip: City-State-Zip: MIAMI FL 33186

Title MGR

Title MGR REINROD PARTNERS, LLC Name

Name RENEGADE CONSTRUCTION Address 100 SE 2ND STREET

Address 305 ALCAZAR AVE **SUITE 4700**

SUITE 3 MIAMI FL 33131

City-State-Zip: City-State-Zip: MIAMI FL 33134

Title MGR

Title MGR AGMBHMS AIR, LLC Name

Name FEBHMS AIR, LLC 7407 NW 7TH STREET Address

Address 11125 NW 29TH STREET City-State-Zip: MIAMI FL 33126

City-State-Zip: DORAL FL 33172

Title MGR Title MGR

Name JHBHMS AIR, LLC Name JRBHMS AIR CHARTERS, LLC

Address 1040 ALFONSO AVE Address 6105 GRANADA BLVD

City-State-Zip: CORAL GABLES FL 33146 City-State-Zip: MIAMI FL 33146

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.

03/07/2024 CONTROLLER SIGNATURE: MARIANA LEON

Electronic Signature of Signing Authorized Person(s) Detail