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| (Re                     | questor's Name)   | -           |
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| (Cit                    | y/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT            | MAIL        |
| (Bu                     | siness Entity Nan | ne)         |
| (Do                     | ocument Number)   |             |
| Certified Copies        | _ Certificates    | s of Status |
| Special Instructions to | Filing Officer:   |             |
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Ra Change

## **COVER LETTER**

Division of Corporations Technical & Training Services, S.A. DE C.V. Corp. SUBJECT: Name of Corporation F11000003366 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jennifer Huang, Esq. Name of Contact Person Kaplan, Massamillo & Andrews LLC Firm/Company 70 East 55th Street, 25th Fl Address New York, NY 10022 City/State and Zip Code jhuang@kmalawfirm.com; diana.amaya@avianca.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jennifer Huang Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha                                       | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of EL SALVADOR to change its registered office or registered agent, or both, in the State of Florida.   |
|--|---|
|  | he corporation: Technical & Training Services, S.A. DE C.V. Corp.   |
| 2. The principal                                       | office address: 2196 N.W. 89th Place, Doral, Florida 33172  |
| 3. The mailing a                                       | ddress (if different): 8333 N.W. 53rd Street, Suite 100, Doral, Florida 3316  |
| 4. Date of incom                                       | poration/qualification: 8/19/2011 Document number: F11000003366   |
| 5. The name and  | street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)   |
|  | Brenda Frohlich (Resigned)  |
|  | 8333 N.W. 53rd Street, Suite 100  |
|  | Doral, FL 33166   |
| 6. The name and (if changed):                          | street address of the new registered agent (if changed) and /or registered office   |
|  | Diana Amaya   |
|  | P.O. Box NOT acceptable   |
| The street addre                                       | ss of its registered office and the street address of the business office of its registered agent, be identical.  |
| Such change wa<br>authorized by th                     | s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.   |
| I hereby accept<br>I further agree t<br>performance of | the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered s document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change. |
| Sigr   | ature of Registered Agent Date  |
| If signing on bel                                      | nalf of an entity:  |
|  | ped or Printed Name   |

\* \* \* FILING FEE: \$35.00 \* \* \*