

F12000004020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

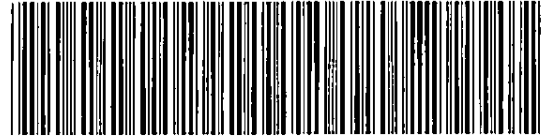
(Business Entity Name)

(Document Number)

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NIC & Amend

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2024 JAN 31 AM 10:32

STATE OF ARIZONA  
DEPARTMENT OF REVENUE

FILED

2024 JAN 31 AM 10:19

STATE OF ARIZONA  
DEPARTMENT OF REVENUE

A. RAMSEY  
FEB -1 2024

**CT CORP**  
**(850) 656- 4724**  
**3458 Lakesore Drive**  
**Tallahassee, FL 32312**

**Date:** 01/31/2024

Acc#120160000072

*en: c DW*

Name:	GAMA AVIATION (ENG) INC.
Document #:	
Order #:	15346385

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

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Email Address for Annual Report Notifications:

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W.P. Verifier _____
Ref# _____

Amount: \$ **43.75**

Thank you!

**COVER LETTER**

**TO:** Amendment Section Division of Corporations

**SUBJECT:** GAMA AVIATION (ENG) INC.

\_\_\_\_\_  
Name of Corporation

**DOCUMENT NUMBER:** F12000004020

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alia Drissi

\_\_\_\_\_  
Name of Contact Person

DLA Piper LLP

\_\_\_\_\_  
Firm/Company

444 W Lake St STE 900

\_\_\_\_\_  
Address

Chicago, IL 60606

\_\_\_\_\_  
City/State and Zip Code

alia.drissi@us.dlapiper.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alia Drissi

at ( 312 ) 368-3911

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☒ \$43.75 Filing Fee &  
Certified Copy

☐ \$52.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**Mailing Address:**

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

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR**  
**AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**  
(Pursuant to s. 607.1504, F.S.)

FILED

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

2024 JAN 31 AM 10:20

F12000004020

(Document number of corporation (if known))

1. Gama Aviation (Eng) Inc.

(Name of corporation as it appears on the records of the Department of State)

2. Delaware

(Incorporated under laws of)

3. 10/01/2012

(Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 11/03/2023

5. Jet East, Inc.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

Jet East FL, Inc.

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. 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:

Name of New Registered Agent

C T Corporation System

1200 South Pine Island Road

(Florida street address)

New Registered Office Address: Plantation, Florida 33324  
(City) (Zip Code)

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 position.

C T Corporation System, By: Laura R Broderick Laura R. Broderick, Assistant Secretary

Signature of New Registered Agent, if changing

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<hr/>	<hr/>	<hr/>	<input type="checkbox"/> Add
		<hr/>	<input type="checkbox"/> Remove
<hr/>	<hr/>	<hr/>	<input type="checkbox"/> Add
		<hr/>	<input type="checkbox"/> Remove
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		<hr/>	<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

DocuSigned by:  
*Matt DeLellis*  
6B6B980E06E3455 ..

(Signature of a director, president or other officer - if in the hands of  
a receiver or other court appointed fiduciary, by that fiduciary)

Matt DeLellis

(Typed or printed name of person signing)

Chief Financial Officer

(Title of person signing)

FILING FEE \$35.00

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY THAT THE SAID "GAMA AVIATION (ENG)  
INC.", FILED A RESTATED CERTIFICATE, CHANGING ITS NAME TO "JET  
EAST, INC." ON THE THIRD DAY OF NOVEMBER, A.D. 2023, AT 9:40  
O'CLOCK A.M.



4992629 8320  
SR# 20240261900

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202680923  
Date: 01-26-24