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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 380904 8105336 AUTHORIZATION : COST LIMIT : \$ 35(.C ORDER DATE: January 16, 2023 ORDER TIME : 9:10 AM ORDER NO. : 380904-005 CUSTOMER NO: 8105336 CHANGE OF AGENT NAME: GARDNER AVIATIONSPECIALIST, INC. PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ____ CERTIFIED COPY XX PLAIN STAMPED COPY CONTACT PERSON: Alexxis Weiland EXAMINER'S INITIALS:

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

in orde	inge is submitted for a corporation r to change its registered office or the corporation: GARDNER AVIATION:	registered agent, or bo	nth, in the State of t		
	office address: 500 AVIATION WA				
3. The mailing a	ddress (if different):				
4. Date of incom	poration/qualification: 05/12/2016	Document	number: F16000	002162	
	street address of the current registe tment of State: (If resigned, enter re		ed office on file w	ith the	
	RANDOLPH, JOSH			_	
5352 NW 21ST TERRACE FORT LAUDERDALE, FL 33309					
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office				ïï
	Corporation Service Company			338 17 11	-
	1201 Hays Street	O. Box NOT acceptable			7
	Tallahassee	.O. Box NOT acceptable	32301	50	J
The street addre	ss of its registered office and the s be identical.	treet address of the bu	isiness office of it	s registered agent,	(P)
Such change was authorized by th	s authorized by resolution duly ad e board, or the corporation has bee	opted by its board of en notified in writing	directors or by an	officer so	
		Kathleen MacIn		CFO	
J	e of an officer or director		ted or typed name and til		
I hereby accept a further agree to of my duties, and document is bein corporation has	the appointment as registered ages to comply with the provisions of all I I am familiar with and accept the tog filed merely to reflect a change been notified in writing of this cha Service Company	nt and agree to act in I statutes relative to the e obligation of my pos in the registered offic ange.	this capacity. se proper and com sition as registered se address, I hereb	aplete performance dagent. Or, if this ny confirm that the	
By: Y)	t-Kinhi.	1/10/2023			
Grace E. Kirby, A If signing on beh	ature of Registered Agent sst. Vice President alf of an entity:		Date		
	ned or Printed Name				

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