

F 20000000202

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

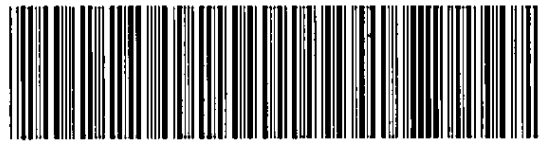
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

135-



600390555816

REC'D
2022 AUG 15 AM 10:50
FILING OFFICE

2022 AUG 15 AM 9:20

cf 8/16/2022

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 8/12/22

****WALK IN****

ENTITY NAME Axispoint Technology Solutions Group, Inc.

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certified Copy of Arts & Amendments Complete File (Including Annual Reports)

Certificate of Status

Certificate of Status Reflecting: _____

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$ 43.75

ACCOUNT # I20140000108
United Corporate
Services, Inc.

Keith Heppard

Please call Tina at the above number for any issues or concerns. Thank you so much!

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.)

SECTION I
(1-3 MUST BE COMPLETED)

2022 AUG 15 AM 9:20

F20000000208

(Document number of corporation (if known))

1. AXISPOINT TECHNOLOGY SOLUTIONS GROUP, INC.

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

2. NEW YORK

(Incorporated under laws of)

3. 12/16/2019

(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? 10/12/2021

5. ATSG, 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)

(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

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

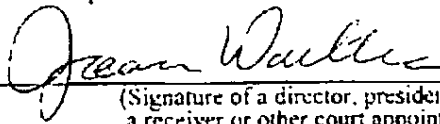
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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> |
|------------------------|-------------|----------------|---------------------------------|
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <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.



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

JEANNE WALTERS

(Typed or printed name of person signing)

CFO

(Title of person signing)

FILING FEE \$35.00

**STATE OF NEW YORK
DEPARTMENT OF STATE**

I hereby certify that the annexed copy for ATSG, INC., File Number 211013000144 has been compared with the original document in the custody of the Secretary of State and that the same is true copy of said original.

WITNESS my hand and official seal of the Department of State, at the City of Albany, on August 12, 2022.



Brendan C. Hughes

Brendan C. Hughes
Executive Deputy Secretary of State



Division of Corporations,
State Records and
Uniform Commercial Code

New York State
Department of State
DIVISION OF CORPORATIONS,
STATE RECORDS AND
UNIFORM COMMERCIAL CODE
One Commerce Plaza
99 Washington Ave.
Albany, NY 12231-0001
www.dos.ny.gov

CERTIFICATE OF AMENDMENT
OF THE
CERTIFICATE OF INCORPORATION
OF

AXISPOINT TECHNOLOGY SOLUTIONS GROUP, INC.

*(Insert the Current Name of Domestic Corporation)
(Name change only)*

Under Section 805 of the Business Corporation Law

FIRST: The current name of the corporation is:
AXISPOINT TECHNOLOGY SOLUTIONS GROUP, INC.

If the name of the corporation has been previously changed, the name under which it was originally formed is:

SECOND: The date of filing of the certificate of incorporation with the Department of State is:
12/16/2013

THIRD: The amendment effected by this certificate of amendment is as follows:

Paragraph FIRST of the Certificate of Incorporation relating to the name of the corporation is amended to read in its entirety as follows:

FIRST: The name of the corporation is:
ATSG, INC.

FOURTH: The certificate of amendment was authorized by: *(Check the appropriate box)*

- The vote of the board of directors followed by a vote of a majority of all outstanding shares entitled to vote thereon at a meeting of shareholders.
- The vote of the board of directors followed by the unanimous written consent of the holders of all outstanding shares.

X

(Signature)

Francesco Scanga

(Name of Signer)

President and CEO

(Title of Signer)

**NEW YORK STATE DEPARTMENT OF STATE
DIVISION OF CORPORATIONS, STATE RECORDS AND UNIFORM COMMERCIAL CODE
FILING RECEIPT**

ENTITY NAME : ATSG, INC.
DOCUMENT TYPE : NAME RESERVATION
ENTITY TYPE : RESERVATION OF DOMESTIC BUSINESS CORPORATION

DOS ID : 6285123
FILE DATE : 09/21/2021
FILE NUMBER : 210921000213
TRANSACTION NUMBER : 202109210000108-215744
EXISTENCE DATE :
DURATION/DISSOLUTION : 11/22/2021
COUNTY :
RESERVATION PIN : 29293484



SERVICE OF PROCESS ADDRESS :
FILER : AXISPOINT TECHNOLOGY SOLUTIONS GROUP, INC.
1 FEDERAL STREET,
BOSTON, MA, 02110, USA
SERVICE COMPANY : CORPORATION SERVICE COMPANY
SERVICE COMPANY ACCOUNT : 45

You may verify this document online at : <http://ecorp.dos.ny.gov>
AUTHENTICATION NUMBER : 100000383653

| | | | |
|-------------------------------|---------|---------------------------------|---------|
| TOTAL FEES: | \$45.00 | TOTAL PAYMENTS RECEIVED: | \$45.00 |
| FILING FEE: | \$20.00 | CASH: | \$0.00 |
| CERTIFICATE OF STATUS: | \$0.00 | CHECK/MONEY ORDER: | \$0.00 |
| CERTIFIED COPY: | \$0.00 | CREDIT CARD: | \$0.00 |
| COPY REQUEST: | \$0.00 | DRAWDOWN ACCOUNT: | \$45.00 |
| EXPEDITED HANDLING: | \$25.00 | REFUND DUE: | \$0.00 |

Filed with the NYS Department of State on 10/12/2021
Filing Number: 211013000144 DOS ID: 4501521

CERTIFICATE OF AMENDMENT
OF THE
CERTIFICATE OF INCORPORATION
OF

AXISPOINT TECHNOLOGY SOLUTIONS GROUP, INC.

(Insert Current Name of Domestic Corporation)

Under Section 805 of the Business Corporation Law

Filer's Name and Mailing Address:

Sarita J. Shoulla

Name:

Morgan, Lewis & Bockius LLP

Company, if Applicable:

One Federal Street

Mailing Address:

Boston, MA 02110-1726

City, State and Zip Code:

NOTES:

1. This form was prepared by the New York State Department of State to amend paragraph FIRST of a certificate of incorporation to change the name of a domestic corporation. You are not required to use this form. You may draft your own form or use forms available at legal stationery stores.
2. The name of the corporation and its date of incorporation provided on this certificate must exactly match the records of the Department of State. This information should be verified on the Department of State's website at www.dos.ny.gov.
3. The Department of State recommends that all documents be prepared under the guidance of an attorney.
4. **The certificate must be submitted with a \$60 filing fee.**

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