## F94000004914

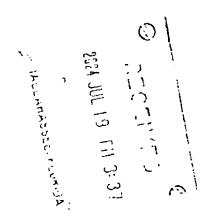
(R	Requestor's Name)	
(A	Address)	
(A	Address)	
(C	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(ê	Business Entity Name)	
(C	Occument Number)	
Certified Copies	Certificates of St	alus
Special Instructions to Fi	iling Officer.	
		:

Office Use Only



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RA & RO Chanse



JUL 22 2024 A RAMSEY CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

, s, s,

ACCOUNT NO. : 12000000195					
REFERENCE : COA-7066					
AUTHORIZATION : Some ()					
COST LIMIT : \$35.00					
ORDER DATE : 07/19/2024					
ORDER TIME :					
ORDER NO. :					
CUSTOMER NO:					
*					
CHANGE OF AGENT					
NAME: GAT - AIRLINE GROUND SUPPORT, INC.					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY PLAIN STAMPED COPY					
CONTACT PERSON:					
EXAMINER'S INITIALS:					

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

statement of cha	provisions of sections 607.0502, 617 inge is submitted for a corporation o or to change its registered office or re	rganized under the le	rws of the State of	ALABAMA		
1. The name of t	the corporation: G.A.TAIRLINE GR	OUND SUPPORT, I	NC.			
	office address: 246 City Circle, Suite					
3. The mailing a	ddress (if different):			<del></del>		
<del>-</del>	poration/qualification: 09/21/1994	Document	number: F94000	0004914		
5. The name and	I street address of the current register timent of State: (If resigned, enter res	red agent and register				
	INCORP SERVICES, INC.					
	3458 LAKESHORE DRIVE			- 1844 - 1		
	TALLAHASSEE	FI	_ 32312			
6. The name and (if changed):	l street address of the new registered	agent (if changed) a	nd /or registered o	2024 JUL 19 M11: 06		
	Corporation Service Company					
	1201 Hays Street					
	Tallahassee	O. Box NOT acceptable FL	32301			
The street addre	ess of its registered office and the st be identical.	reet address of the b	usiness office of	its registered agent,		
	as authorized by resolution duly add ne board, or the corporation has bee					
/S/ SCOT	т смітн	SCOTT SMITH	H, CFO			
	Signature of an officer or director		Printed or typed name and title			
I further agree to of my duties, an document is being corporation has	the appointment as registered ager to comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change is been notified in writing of this chan Service Company	statutes relative to t obligation of my po in the registered offi	this capacity, he proper and co sition as register, ce address, I here	mplete performance ed agent. Or, if this by confirm that the		
By: Y	ro Yakubi.	07/12/2024				
	nature of Registered Agent		Date			
If signing on be	half of an entity:					
	BY, ASST. VICE PRESIDENT					
13	yped or Printed Name	TEDE 625.60 # * *				
	* * * FILING	G FEE: \$35.00 * * *				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)

CSC COA-7068