H41613

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: PENINSULA AVI	ONICS INC.			
DOCUMENT NUMBE		<u> </u>			
	Amendment and fee are su	bmitted for filing.			
Please retorn all correspo	ondence concerning this ma	itter to the following:			
	CI	IRISTOPHER AMOR			
_	Name of Contact Person				
	PENINSULA AVIONICS, INC.				
_		Firm Company			
	142	229 SW 127 ST.			
	Address				
	MIZ	AMI, FL 33186			
_	•	City State and Zip Cod	u e		
	CHRI	S.AMOR@PENINSULAA	AVIONICS.COM		
		sed for future annual report			
For further information c	oncerning this matter, plea	se cull:			
JIMMY ŁOCKHART		at (255-5077		
Name of (Contact Person	Area Co	/ de & Daytime Telephone Number		
Fuctosed is a check for t	ne following amount made	payable to the Florida Dep	artment of State:		
S35 billing Fee	☐\$43.75 Filling Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ameno Divisio P.O. B	g Address Iment Section on of Corporations ox 6327 issee, FL 32314	Ameno Divisio The C 2415 1	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Saite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation οť

PENINSULA AVIONICS, INC

(Name of Corporation as currently filed with the Florida Dept. of State) H41613 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: chartered of professional association for the abbreviation "PA" B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. 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 rFlorida street addressi New Registered Office Address. 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, it changing

Check if applicable

 $[\]square$ The amendment(s) is are being filed pursuant to s. 607.0120 (11) (e). F.S.

• • •

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

a titach additional sheets, it necessary).

Please note the officer director title by the first letter of the office title

 $P = President, V = Vice President | \hat{I} = Treasurer, S = Secretary; D = Director, TR = Trustee | C = Chairman or Clerk, CEO = Chief Executive Officer, CFO = Chief Financial Officer | If an officer director holds more than one title, list the first letter of each office held President, Treasurer, Director would be PTD,$

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change Mike Jones, V as Remove, and Sally Smith, SV as an Add

Δ Change	PT John	<u>Doc</u>		
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>		
X Add	<u>SV</u> <u>Sally</u>	Smith		
Type of Action (Check One)	<u>l'itle</u>	<u>Name</u>	Addre ₂ s	
LiChange	MEMBIR	JAMES STARKWEATHER	12218 SW 132ND CT	
X Add			MIAMI, FL 33186	-
Remove				
2) Change	MANAC	CHANDINI GARIB	14229 SW 127TH ST	_
\dd			MIAMI, FL 33186	ر د د تا آ
X Remove Change				0.03 (0.1.27
\\dd				_ :
Remove				<u>۔</u> ب
i) Change			: -	
\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\				-
Remove				
5/ Change				_
Add				-
Remove				
6) Change		***	M declaration	_
\dd				=
Remove				

Famending or adding additional Articles, enter change(s) here: Attack additional sheets, it necessary) — (Be specific)	
. /	
\mathcal{M}'	
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f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	÷
(i) not applicable, indicate NA)	*
· ·	
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	10/12/2023	
he date of each amendment(s) a	doption:	, if other than th
ate this document was signed.		
Iffective date <u>if applicable</u> :		
	(no more than 90 days after amendment file data	.,
Note: If the date inserted in this locument's effective date on the D	block does not meet the applicable statutory filing requirement of State's records.	nts, this date will not be listed as th
doption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was were ad action was not required.	opted by the incorporators, or board of directors without share	holder action and shareholder
The amendment(s) was were ad by the shareholders was were s	opted by the shareholders. The number of votes east for the artificient for approval.	nendment(s)
must be separately provided for	proved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendment for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
10/12/202 Dated	0 1-	بي. د.
Signature		ن. س
selecte	irector, president or other officer – if directors or officers have d, by an incorporator – if in the hands of a receiver, trustee, or ted fiduciary by that fiduciary)	
	CHRISTOPHER AMOR	· -
	(Typed or printed name of person signing)	

PRESIDENT

(Title of person signing)