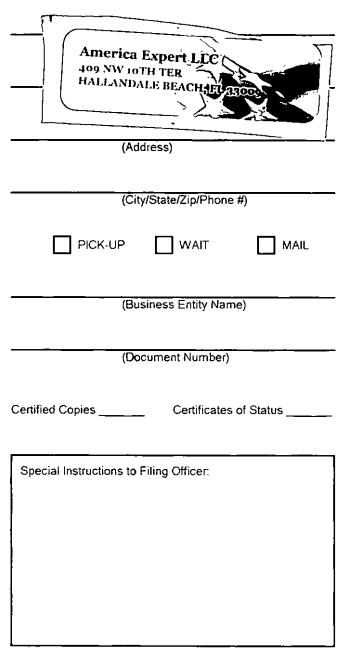
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IMPACTO AVIATION SERVICES, LLC		
( <u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records.) ited Liability Company)	
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  the new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC".	and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<b>7</b> - C
(Principal office address MUST BE A STREET ADDRES	(S)	
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		<b>1</b> 50
Enter new mailing address, if applicables		
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Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	en	
<del></del>	Florid	<b>a</b> Zip Code

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

,}

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records;

MGR = Manager

AMBR = Authorized Member

<u> Fitle Name</u>		Address	Type of Action	
MGR RENATO SCARCELLO		739 NE 94TH ST	Add	
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ctive date, if other than the diffective date is listed, the date must be	ate of filing:	ior to date of filing o	opti	ional) er tiling a Pursuant to 60	15 A
If the date inserted in this bloc	k does not meet the app	licable statutory fil	ing requirements, thi	is date will not be list	ted
ment's effective date on the Dep	artment of State's recoi	ds.			
ecord specifies a delayed e	affective date but	not an effective	a time at 12:01	am on the earli	ier
e 90th day after the recor		not an enective	time, at 12.01	a.m. on the cam	ICI
November 14	2017				
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Typed or printed name of signee