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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : R&P ACCOUNTING AND TAXES INC

Account Number : 120170000090 Phone : (305)358-1310 Fax Number : (305)503-6701

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ared 8723 ag

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AIR COMMANDER AEROSPACE, LLC

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To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AIR COMMANDER AEROSPACE, LLC

(Name of the Limited Liability Company as It now appears on our records.) (A Florida Limited Liability Company)

document number <u>L15000057168.</u>		,
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	•
The new name must be distinguishable and contain the words "Limited Liab:	hty Company," the designation "LLC" or the abbrev	viation "L.L.C."
Enter new principal offices address, if applicable:	1444 NW 14 TH AVE APT 707	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33125	<u></u>
Enter new mailing address, if applicable:	1444 NW 14 ¹¹¹ AVE APT 707	
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33125	
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33125	
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office agent and/or the new registered office address here:		f the new registere
B. If amending the registered agent and/or registered office		f the new registere
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:		f the new registere

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.

MGR = Manager

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

AMBR = Authorized Member Title Title Name <u>Address</u> Type of Action 1444 NW 14TH AVE APT 707 ∏Add MGR DIEGO A RENGIFO ZAPATA MIAMI, FL 33125 Remove X Change MGR CRISTIAN D LONDONO ZAPATA 1444 NW 14¹⁰ AVE APT 707 ∏Add MIAMI, FL 33125 Remove X Change _ □Remove Change

D. If amending any other information, enter change(s) here: (Attach)	addinonal sheets, if necessary.)
F. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of file	(optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of fill Note; If the date inserted in this block does not meet the applicable statuto document's effective date on the Department of State's records.	
If the record specifies a delayed effective date, but not an effective time, at 12:0 record is filed.	I a.m. on the earlier of: (b) The 90th day after the
Dated October 3, 2023. Signature of a tryffiber of authorized repres	centative of a member
DIEGO A RENGIFO ZA	APATA
Typed or printed name of s	rignee