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1. The first step is to identify the problem or question that needs to be answered. This involves understanding the context and the specific requirements of the task.

2017 APR -5 AM 7:17

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TALLAHASSEE, FLORIDA

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2017 APR -5 PM 1:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY

APR - 6 2017

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 585565 8039846  
AUTHORIZATION :   
COST LIMIT : \$30,00

ORDER DATE : April 5, 2017  
ORDER TIME : 1:05 PM  
ORDER NO. : 585565-005  
CUSTOMER NO: 8039846

DOMESTIC AMENDMENT FILING

NAME: AAT ENGINE ACQ. I, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT  
\_\_\_\_ RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
\_\_\_\_ PLAIN STAMPED COPY  
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER'S INITIALS: \_\_\_\_\_

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: AAT ENGINE ACQ. I, LLC**

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marlon A. Hill

\_\_\_\_\_  
Name of Person

Hamilton, Miller & Birthisel, LLP

\_\_\_\_\_  
Firm/Company

150 SE 2nd Avenue, Suite 1200

\_\_\_\_\_  
Address

Miami, FL 33131

\_\_\_\_\_  
City/State and Zip Code

mhill@hamiltonmillerlaw.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marlon A. Hill

305 379-3686

at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



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>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MBR	Steven Polederos	1850 N.W. 82nd Avenue	<input type="checkbox"/> Add
		Doral, FL 33126	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	SV Aviation Capital, LLC	6090 NW 112th Street	<input checked="" type="checkbox"/> Add
		Miami FL 33156	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Altitude Consulting Group, LLC	1535 Dorado Avenue	<input checked="" type="checkbox"/> Add
		Coral Gables, FL 33146	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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2011 APR -5 AM 7:17  
CLERK OF DISTRICT COURT  
SANTA FE, NM

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated April 3, 2017

*[Handwritten signature]*

**Marlon A. Hill, Authorized Representative**

Typed or printed name of signee