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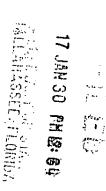
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COVER LETTER

TO:	Registration Se Division of Cor		,	
erm i	Everest Aer	ro Solutions, LLC		
SUBJ	EC1:	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub	_	
		-	Dinesh Raj Khatiwada	
		- , , , , , , , , , , , , , , , , , , ,	Name of Person	
		Eve	erest Aero Solutions, LLC	
			Firm/Company	
		:	2960 Curtis King Blvd	
			Address	
			Fort Pierce, Florida 34946	
			City/State and Zip Code	
		E-mail address: (dinesxh@gmail.com to be used for future annual report notifi	cation)
For fu	rther information c	oncerning this matter, please ca	all:	
	Dinesh R	aj Khatiwada	954 573-4809 at ()	
	Name o	f Person		Telephone Number
Enclo	sed is a check for th	ne following amount:		
≅ \$2	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)
	W. g. a. e.	DIC ADDRESS		NA ARRESO

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

TO:

Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 5, 2017

DINESH RAJ KHATIWADA 2960 CURTIS KING BLVD FORT PIERCE, FL 34946 US

SUBJECT: EVEREST AERO SOLUTIONS, LLC

Ref. Number: L16000231181

We have received your document for EVEREST AERO SOLUTIONS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 417A00000284

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Everes	t Aero Solutions, LLC	
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liabilit	y Company were filed on December 22, 2016	and assigned
Florida document number L16000231181		
This amendment is submitted to amend the following	;;	
A. If amending name, enter the new name of the l	limited liability company here:	
The new name must be distinguishable and contain the words "	Limited Liability Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		* - mag
(Mailing address MAY BE A POST OFFICE BOX)		7
		-
B. If amending the registered agent and/or re	gistered office address on our records, enter	
registered agent and/or the new registered office a	ddress here:	2 27
		S
Name of New Registered Agent:		9
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	. Florida	
******	City , Florius	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>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Pushpa Raj Paudel	3902 SW Coquina Cove Way,	■ Add
		Apt# 203, Palm City, FL. 34990	□ Remove
			☐ Change
MGR	Rewat Raman Khanal	2331 NW 10Th Ave	Add
		Apt # 103, Miami, FL. 331271	☐ Remove
			Change
			□ Add
			Remove
			☐ Change
			□ Add Remove
			30 Change
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			□ Change

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Page 3 of 3

Filing Fee: \$25.00