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COVER LETTER

Tallahassee, FL 32314

	Registration Se Division of Cor			
SUBJEC		INEERING LLC	·	
SUBJEC	-1:	Name of Lim	ited Liability Company	
The enci	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
		ndence concerning this matter	•	
		Esteban Acosta, Esq.		
			Name of Person	
		Parker Acosta Law, PLLC		
			Firm/Company	
		4850 NW 99 CT		
			Address	
		DORAL, FL 33178		
		info@parkeracostalaw.com	City/State and Zip Code	
			to be used for future annual report no	otification)
For furth	er information c	oncerning this matter, please co	all:	
Esteban	Acosta, Esq.		305 343-0335	
_	Name o	(Person	at () Area Code Dayti	ine Telephone Number
Enclosed	l is a check for th	ne following amount:		
■ \$2 5.	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 Addres Registration S		Street Address: Registration S	ection
	Division of C	orporations	Division of Co	orporations
	P.O. Box 632	7	The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AIRO ENGINEERING LLC	27 88E
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 10/30/2018 Florida document number 1.18000255066	and assigned 3
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
ENGINEL. LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, enter the agent and/or the new registered office address here:	name of the new registered
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street address	
Florida	a

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.

Cuy

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
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Note: If the	ate, if other than the date of filing: date is listed, the date must be specific and cannot be priored date inserted in this block does not meet the appliance of fective date on the Department of State's records	icable statutory filing requirements.	ptional) offer filing.) Pursuant to 605.0207 (3) this date will not be listed as th
	cifies a delayed affective date, but not an affective	time, at 12:01 a.m. on the earlier of	f: (b) The 90th day after the
	eries a delayed effective date, but not an effective		. (b) The sources are one
rd is filed.	$\frac{5/23/22}{5/23/22}$	·	 1
rd is filed.	, /	·	 1
re record spe ord is filed. Dated	5/23/22 Signature of a member or auth	horized representative of a member	2022 MAY
ord is filed.	5/23/22	horized representative of a member	TALLAHASSEE.

Filing Fee: \$25.00