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(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Business Enuty Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

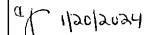




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COVER LETTER

	Registration Se Division of Cor							
	FLORIDA AIRCRAFT SOLUTIONS LLC							
SUBJEC	T:							
SUBJECT: Name of Limited Liability Company								
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please return all correspondence concerning this matter to the following:								
		Ezequiel Sanchez						
	Name of Person							
			Firm/Company					
		2320 NW 86 ST						
		Miami, FL 33147	Address					
		Flaircraftsolutions@gmail.c	City/State and Zip Code					
		E-mail address: ()	to be used for future annual report no	ptification)				
For furthe	er information c	oncerning this matter, please ca	all:					
Ezequiel	Sanchez		305 300-7637					
	Name o	f Person	at () Area Code Dayii	me Telephone Number				
Enclosed	is a check for th	ne following amount:						
□ \$25.0	00 Filing Fee	S30.00 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLORIDA AIRCRAFT	SOLUTIONS LLC	1921: 0 6:110 ==
(Name of the Limited Liability Comp. (A Florida Limited	nny as it now appears on our records.) Liability Company)	<u>1924 - 177 - 3</u> P.11 12: 57
The Articles of Organization for this Limited Liability Company Florida document number 121000388309	were filed on August 31, 2021	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or	the abbreviation "L.L.C."
Inter 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)		<u>.</u>
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Floric	la
	City	Zıp 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 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>	Type of Action
AMBR	Camilo A. Consuegra	7521 Miramar Pkwy	
		Mi 17 22022	
		Miramar Fl 33023	Remove
			Change
			□Add
			□Remove
			Change
			□ Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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. December 27th 2023 Dated Ignature of a member or authorized representative of a member Ezequiel Sanchez Typed or printed name of signee

Filing Fee: \$25.00