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ATTN: DARLENE CONNEL

Gabriel Valme

Ph:786-554-6298

15000 sw 15000 ave

Miami, FL 33196

Gabriel@omsndt.com

COVER LETTER

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ELC Name of Limited Liability Company ce(s) are submitted for filing. g this matter to the following: Name of Person chine Solutions LLC Firm/Company D Ave Address 196 City/State and Zip Code dt.com vail address: (to be used for future annual report notification) ter, please call: 1786 186 187 188 199 Area Code Daytime Telephone Number nt: g Fee & S55.00 Filing Fee & Certificate of Status & Certificat Copy (radditional copy is enclosed) Street Address: Registration Section
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2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Aircraft & Turbine solutions LLC (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 04/11/2022 and assigned Florida document number L22000173424 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: No change The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." No change Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) No change 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 name of the new registered agent and/or the new registered office address here: No change Name of New Registered Agent: No change New Registered Office Address: Enter Florida street address _. Florida __ City

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>	<u>Address</u>	Type of Action
Managing	Gabriel R. Valme	15000 SW 150 Ave	≡ Add
		Miami, FL 33196	□Remove
			□ Change
Mbr	Keila Valme	15000 SW 150 Ave	= Add
		Miami, Fl. 33196	□Remove
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