(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
,	
- AN LAN	
(Document Number)	
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OCT -7 2013

R. WHITE

09/30/13--01059--023 **35.00

COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations	
NAME OF CORPORATION: Aviation	Equipment Support
DOCUMENT NUMBER: M53937	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.
Please return all correspondence concerning this matter	er to the following:
Terry	Name of Contact Person
	Name of Contact Person
Florida Ui	nlimited Inc Firm/Company
1308 South	h Central Cir
1000 00011	Address
Longwood	FL 37716
	City/ State and Zip Code
ST a Housking office	Och man
E-mail address: (to be use	d fortification)
·	
For further information concerning this matter, please	call:
Nicholas Yodice	at (407) 300 - 7435 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made pa	syable to the Florida Department of State:
\$35 Filing Fee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address

Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

FILED Articles of Incorporation Equipment (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: FILING CANCELLED A. If amending name, enter the new name of the corporation: RETURNED CHECK name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association." or the abbreviation "P.A." 8618 Great Cove Dr. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Windermere F1 32819 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) . Florida New Registered Office Address: (Cin·) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President, V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = ClinefExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT John	FILING CANCELLED RETURNED CHECK	
X Remove	<u>V</u> <u>Mik</u>	e Jones	KETURNED CHECK
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	_D	Charles Miles	2108 Beltway DR
_X Add			Houston, TX
Remove			
2) Change	_D	Robert George	Orlando, Fl
X Add			
Remove 3) Change	Ď	Karen George	Orlando, FL
X Add		<u> </u>	
Remove			
4) Change	D	Gregory Loughlin	Grlando, Fl
_X _ Add			
Remove			
5) Change			
Add			
Remove			
o) Change			
Add			
Remove			

FILING CANCELLED E. If amending or adding additional Articles, enter change(s) here: RETURNED CHECK (Attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

FILING CANCELLED RETURNED CHECK

date this document was signed.	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.
	ved by the shareholders through voting groups. The following statement sch voting group entitled to vote separately on the amendment(s):
"The number of votes cast for	the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder
Dated9/6	13/2013
Signature	Now Veore
(By a dire	ctor, president or other officer - if directors or officers have not been
selected,	by an incorporator - if in the hands of a receiver, trustee, or other court
appointed	fiduciary by that fiduciary)
	bases Coem &
	(Typed or printed name of person signing)
	(Title of person signing)
_	<u> </u>