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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: AIRPORT AND CO	DMMERCIAL EQUIPME	NT SUPPLIERS, INC.			
DOCUMENT NUM	BER: P02000009086					
The enclosed Articles	of Amendment and fee are sul	omitted for filing.				
Please return all corre	spondence concerning this mat	ter to the following:				
	Fadi Soubra					
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person				
	AIRPORT AND COMMERCIAL EQUIPMENT SUPPLIERS, INC.					
	Firm/ Company					
	3700 NW 124 Ave #132					
	Address					
	Coral Springs, Fl 33065					
	City/ State and Zip Code					
	fadi.soubra@acesincusa.com					
	E-mail address: (to be us	ed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call:				
Kelly Valverde		954 at (483-3959			
Name	of Contact Person	Area Coo	le & Daytime Telephone Number			
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	rtment of State:			
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52,50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahussee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

Articles of Amendment to Articles of Incorporation of

AIRPORT AND COMMERCIAL EQUIPMENT SUPPLIERS, INC.

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

(Name of Corporation as curren	tly filed with the Florida Dept. of	State)	
P02000009086			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adop	ts the following amendment(s) to	
A. If amending name, enter the new name of the corporation:			
n/a		The new	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A	A professional corporation name	the abbreviation "Corp.,"	
B. Enter new principal office address, if applicable:	n/a		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		202! SE FAL	
		EI 2024 AUG - SECIRE TE	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10630 S Lago Vista Circle	55명 6 F	
	Parkland, Fl 33076	9.5. %	
		意思 5	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address Name of New Registered Agent		of the	
(Florida s	treet address)		
New Registered Office Address:	Ţ	lorida	
A CONTRACTOR OF THE CONTRACTOR	(Cip)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Ager I hereby accept the appointment as registered agent. I am familian	nt: with and accept the obligations of	the position.	
Signature of New	Registered Agent, if changing		
Check if applicable			

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)

Example:

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

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

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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	Y	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	Title		Name	Address
1) Change	PD		Fadi Soubra	10630 S Lago Vista Circle
Add				Parkland, FI 33076
Remove				
2) Change	VD	_	Yuu Soubra	10630 S Lago Vista Circle
XAdd				Parkland, FI 33076
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

E. <u>If amending or</u> (Attach <i>additione</i>	adding additional Artical sheets, if necessary).	icles, enter change(s) here: (Be specific)	
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F. <u>If an amendme</u>	nt provides for an excl	hange, reclassification, or cancellation of issued shares,	
provisions for	implementing the ame	endment if not contained in the amendment itself:	
	licable, indicate N/A)		
n/a 			
			<u>.</u> .

	7/31/24	
The date of each amendment(s) a date this document was signed.	adoption:	, if other than the
7/3	1/24	
Effective date if applicable:	Comment of the Control of the Contro	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adaction was not required.	dopted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amend sufficient for approval.	iment(s)
	oproved by the shareholders through voting groups. The following sor each voting group entitled to vote separately on the amendment(s	
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by 100%	<u>.</u> "	
	(voting group)	
7/31/24 Dated		
Signature		
	directors president or other officer – if directors or officers have not ed, by an incorporator – if in the hands of a receiver, trustee, or oth	
	nted fiduciary by that fiduciary)	er court
	Fadi Soubra	
	(Typed or printed name of person signing)	
	PD	

(Title of person signing)