## P06000124009

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| PICK-UP WAIT MAIL                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO  | ORATION: General MRO Aer                    | ospace Inc   |   |                      |
|--|---|--|---|----------------------|
| DOCUMENT NUM   | 1107000131000                               |  |   |                      |
| The enclosed Article   | s of Amendment and fee are su               | bmitted for filing.  |   |                      |
| Please return all corr   | espondence concerning this ma               | tter to the following:   |   |                      |
|  | Elias Correa Menendez                       |  |   |                      |
|  | Name of Contact Person                      |  |   |                      |
|  | Trembly Law Firm, P.L.                      |  |   |                      |
|  | Firm/ Company                               |  |   |                      |
|  | 9700 S. Dixie Highway, PH                   | 1100   |   |                      |
|  |   | Address  |   |                      |
|  | Miami, Florida 33156                        |  |   |                      |
|  | -   | City/ State and Zip Cod  | ę   |                      |
| Elias@tremblylaw.com   |   |  |   |                      |
|  | E-mail address: (to be us                   | sed for future annual report                                       | notification)   |                      |
|  |   |  |   |                      |
| For further informati  | on concerning this matter, plea             | se call:   |   |                      |
| Elias Correa Meneno  | lez   | at ( <sup>305</sup>  | 431-5678  | 2023<br>SE           |
| Name of Contact Person   |   | Area Co  | de & Daytime Telephone Number   | TALL                 |
| Enclosed is a check t  | or the following amount made                | payable to the Florida Depa  | artment of State:   | 7.47<br>7.47<br>7.30 |
| ■ \$35 Filing Fee  | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)                      | OF SIMTE             |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |   | Amend<br>Division<br>The C<br>2415 N                               | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303 |                      |

## Articles of Amendment to Articles of Incorporation of

| General MRO Aerospace me  | . C. C   | Chalanda El Cl. D. A. CCAAA  |                          |
|---|--|--|--------------------------|
| P06000124009  | of Corporation as currently                              | v filed with the Florida Dept. of State)   |                          |
|   | (Document Number o                                       | f Corporation (if known)   |                          |
| Pursuant to the provisions of section 607, its Articles of Incorporation:   |  | Florida Profit Corporation adopts the following  | g amendment(s) to        |
| A. If amending name, enter the new n  | ame of the corporation:                                  |  |                          |
| •   | _  |  | The new                  |
|   | Corp," "Inc," or "Co". :                                 | company," or "incorporated" or the abbreviation of the abbreviation of the contain in the contai | on "Corp.,"              |
| B. Enter new principal office address, (Principal office address MUST BE A S  |  |  |                          |
| <ul> <li>C. Enter new mailing address, if appl (Mailing address MAY BE A POST)</li> <li>D. If amending the registered agent ar new registered agent and/or the new</li> </ul> | OFFICE BOX)  id/or registered office addi                |  |                          |
|   | Elias Correa Menendez                                    | <u> -</u>  | 202<br>SE                |
| Name of New Registered Agent  | 9700 S. Dixie, PH 1100                                   |  | 2023 HAY 30<br>SECRETAIN |
|   |  | veet address)  | 스템 중                     |
| New Registered Office Address:  | Miami  | Florida 33156  | 9<br>19.0 <b>=</b> 1     |
|   |  | (City) (Zip C  | PATE 15                  |
| New Registered Agent's Signature, if call thereby accept the appointment as registed  | hanging Registered Agent<br>tered agent. I am familiar v | i with and accord the obligations of the position.   |                          |
|   | ////   |  |                          |
|   | Signature of New R                                       | egistered Agent, if changing   | •                        |

Check if applicable

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

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 = 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.

| Example: X Change          | <u>PT</u> <u>John</u>  | <u>Doe</u>          |  |
|----------------------------|------------------------|---------------------|--|
| X Remove                   | <u>V</u> <u>Mik</u>    | e Jones             |  |
| X Add                      | <u>SV</u> <u>Sally</u> | y Smith             |  |
| Type of Action (Check One) | <u>Title</u>           | <u>Name</u>         | <u>Addres</u> s                        |
| 1) Change                  | CEO, D                 | Lester Kamberger    | 10990 NW 92 Ter                        |
| X Add                      | <del></del>            |                     | Medley, FL 33178                       |
| Remove                     |                        |                     |  |
| 2) Change                  | D                      | Cristian Munoz      | 10990 NW 92 Ter                        |
| X Add                      |                        |                     | Medley, FL 33178                       |
| Remove 3) Change           | COO                    | Alexander Kamberger | 10990 NW 92 Ter                        |
| X Add                      |                        |                     | Medley, FL 33178                       |
| Remove                     |                        |                     |  |
| 4) Change                  | CFO, S                 | Cristian Munoz      | 10990 NW 92 Ter                        |
| X Add                      |                        |                     | Medley, FL 33178                       |
| Remove                     |                        |                     | 2023<br>SEC                            |
| 5) Change                  |                        |                     | SEORITALLARIA                          |
| Add                        |                        |                     |  |
| Remove                     |                        |                     |  |
| 6) Change                  |                        |                     |  |
| Add                        |                        |                     | —————————————————————————————————————— |
| Remove                     |                        |                     |  |

| (Attach additional sheets, if necessary). (Be specific)  |                  |
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| . 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) |                  |
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|  | option:  | , if other than the                           |
|--|--|---|
| date this document was signed.   |  |   |
| Effective date <u>if applicable</u> :                                      | (no more than 90 days after amendment fi   | le date)                                      |
| Note: If the date inserted in this bl document's effective date on the Dep | ock does not meet the applicable statutory filing requorantment of State's records.  | irements, this date will not be listed as the |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )   |   |
| ☐ The amendment(s) was/were adopaction was not required.                   | oted by the incorporators, or board of directors without   | shareholder action and shareholder            |
| The amendment(s) was/were adopy the shareholders was/were suf              | oted by the shareholders. The number of votes cast for ficient for approval.   | the amendment(s)                              |
| must be separately provided for  | roved by the shareholders through voting groups. The peach voting group entitled to vote separately on the amfor the amendment(s) was/were sufficient for approval |   |
|  | (voting group)   |   |
|  | -y 12 2023   |   |
| Signature(By a dii<br>selected   | rector, president or other officer – if directors or officer, by an incorporator – if in the hands of a receiver, trus   | rs have not been tee, or other court          |
|  | ed fiduciary by that fiduciary)  |   |
| -  | (Typed or printed name of person signing)  |   |
| -  | (Title of person signing)  |   |

2023 MAY 30 PM 4: 16 SECRETARY OF STATE TAILLAHASSEE, FL