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To:

Division of Corporations

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: (850)617-6380

From:

Account Name : BARINAS & ASSOCIATES INC.

Account Number : I2000000082

Phone

: (305)871-0889

Fax Number

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	;			

COR AMND/RESTATE/CORRECT OR O/D RESIGN AIS AVIONICS, INC.

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TO: Amendment Section

COVER LETTER

Division of Corporations				
NAME OF CORPORATION	AIS AVIONICS, I	NC:		
DOCUMENT NUMBER:				
The enclosed Articles of Ame		hmitted for filing		
* * *				
Please return all corresponden	ce concerning inis ma	tter to the following:		
Yanelle	M Barinas			
		Name of Contact Person	1	
Barinas	& Associates Inc			
		Firm/ Company		
5701 N	W36.ST			
,		Address		
Virgini	a Gardens, FL 33166			
**	•	City/ State and Zip Cod	e -	
barinasb@gir	ail.com			
. E-	E-mail address: (to be used for future annual report notification)			
For further information concer	ning this matter, pleas	e call:		
Yanelle M Barinas		ai (305	871-0889	
Name of Conta	ct Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the fol	lowing amount made :	navable to the Florida Dens	ertminatual States	
			at Black	
	43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section		Street	Address	
	Section	Amendment Section Division of Corporations		
P.O. Box 63	27	Clifton Building		
Tallahassec,	FL 32314		xecutive Center Circle	

Articles of Amendment to Articles of Incorporation of

AIS AVIONICS, INC.			
(Name of Corporation	n as currently filed with the F	lorida Dept. of State)	
P06000126138		·	
(Docume)	ent Number of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1006, Florida (its Articles of Incorporation:	Statutes, this Florida Profit Co.	rporation adopts the following amendme	ent(s)
A. If amending name, enter the new name of the cor	poration:		
name must be distinguishable and contain the word "Corp.," 'Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the a	"Inc," or "Co". A profession	or "incorporated" or the abbreviation nal corporation name must contain the	· Y
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADD S</u>			
C. Enter new mailing address. If applicable: (Mailing address MAY BE A POST OFFICE BOX D. If amending the registered agent and/or registere new registered agent and/or the new registered of	d office address in Florida, en	iter the name of the	,
Name of New Registered Avent			
	(Florida street address)		
New Registered Office Address:	(Cipy)	, Florida(Zip Codu)	
	(s.ny)	(Zip Coar)	
New Registered Agent's Signature, if changing Regis Thereby accept the appointment as registered agent. I	dered Agent: am familiar with and accept the	e obligations of the postitors	
Signat	ture of New Registered Agent, ij	Changing	ý,

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 nucessary)

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 itsied 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>	John Doe	
X Remove	<u>v</u> .	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add.			
Remove			
2) Change	 		
Add			
Remove			
3)Change	, , , , , , , , , , , , , , , , , , , 		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add	,		
Remove			
6) Change			
Add			
Remove			

	(Be specific)
Addition of the second of the	
If an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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If an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, and and the amendment itself:
If an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, and and the amendment itself:
If an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

	AUGUST 30, 2016	
The date of each amendment(s) addate this document was signed.	loption:	if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this a document's effective date on the Do	lock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendmen flicient for approval.	at(s)
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ment _.
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
bý		
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pred by the board of directors without shareholder action and shareholder.	lder-
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
08/30/2016		
Dated	- N	
Signature =	The state of the s	
(By a d	irector, president or other officer — if directors or officers have not bee 1, by an incorporator. — if in the hands of a receiver, trustee, or other co led fiduciary by that fiduciary)	
	JOSE DE FREITAS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	······································