P0900036205

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TATE AHASSEL FL

2022 SEP 15 AH 11: 49

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: AIRPORT PARTS	AND SERVICES, CORP.	
DOCUMENT NUMI	P00000016205		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	LEO MACHIN		
		Name of Contact Person	1
	-	Firm/ Company	
	7108 LAUREL LN		
		Address	
	MIAMI LAKES, FL 33014		
		City/ State and Zip Code	t
	LEO037ML@AOL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
LEO MACHIN		at (
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Division The C 2415 i	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

2022 SEP 15 AH 11: 49

AIRPORT PARTS AND SERVICES, CORP.

	of Corporation as currently	filed with the Florida Dept. of State).	ÁHÁSSÉR F
P09000036205			-Anass <u>ee, r</u>
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Cohartered," "professional association,"	Corp," "Inc," or "Co". A	ompany," or "incorporated" or the abbreviation professional corporation name must contain	n "Corp.," the word
B. Enter new principal office address, (Principal office address MUST BE A S			
			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			
D. If amending the registered agent ar new registered agent and/or the ne		ess in Fiorida, enter the name of the	
	LEO MACHIN		
Name of New Registered Agent	7108 LAUREL LN	,	
	(Florida stre	ot address)	
	MIAMI LAKES FL	33014	
New Registered Office Address:		, Florida, Zip C	:ode)
	,	V.,	•
New Registered Agent's Signature, if c	hanging Registered Agent:		
I hereby accept the appointment as regis.	tered ogent. I am familiar w	ith and accept the obligations of the position.	
<i>[</i>	//		
		· ·	
_3	Signature of Many Da	oistered Agent if changing	

Check if applicable

 \square 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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	PD	REBECCA MACHIN	7108 LAUREL LN
Add			MIAMI LAKES, FL 33014
X Remove			
2) X Change	PD	LEO MACHIN	7108 LAUREL LN
Add			MIAMI LAKES, FL 33014
Remove 3) Change			
Add			
Remove			
4) Change		-	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Ar Attach additional sheets, if necessary).	(Be specific)				
				<u>.</u>	
<u> </u>			-		
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	•				
					
If an amendment provides for an exc	change, reclassifi	cation, or cance	llation of issued :	hares,	
provisions for implementing the an (if not applicable, indicate N/A)	<u>iendment if not c</u>	ontained in the	amendment itsel	<u>f:</u>	
(y nor applicable, marcine 1971)					
	<u> </u>				
		·			
<u></u>		4			
					

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The date of each amendment(s) adoption: _	9/8/2022	_, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	9/8/7022	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing requirements, this date will of State's records.	not be listed as the
Adoption of Amendment(s) (C	CHECK ONE)	
The amendment(s) was/were adopted by the action was not required.	he incorporators, or board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	he shareholders. The number of votes cast for the amendment(s) or approval.	
	the shareholders through voting groups. The following statementing group entitled to vote separately on the amendment(s):	
"The number of votes cast for the an	nendment(s) was/were sufficient for approval	2
by	<u></u>	022
(v	poting group)	F 1 1 1 1 1 1 1 1 1
	19-8-72 BS	<u>о</u>
Dated		- MI III - P
Signature		_ = •
(By a director, preselected, by an in	resident or other officer – if directors or officers have not been neorporator – if in the hands of a receiver, trustee, or other court ary by that fiduciary)	6 ካ
LEO MA	CHIN	
	(Typed or printed name of person signing)	
PRESIDE	ENT	
	(Title of person signing)	