

12/8/22, 2:12 PM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000413879 3)))



H220004138793AD03

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6360

From:

Account Name : CORPAG REGISTERED AGENTS (USA), INC.
Account Number : 120220000185
Phone : (305)358-7872
Fax Number : (305)401-3890

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
PROFESSIONAL AVIATION SUPPORT CORP.

Certificate of Status	1
Certified Copy	1
Page Count	06
Estimated Charge	\$52.50

Electronic Filing Menu

Corporate Filing Menu

Help

To

Page: 1 of 7

2022-12-09 19:28:55 GMT

13054023898

From: Enrique Traveso

850-617-6381

12/9/2022 7:15:14 AM PAGE

1/001 Fax Server



December 8, 2022

FLORIDA DEPARTMENT OF STATE

Division of Corporations

PROFESSIONAL AVIATION SUPPORT CORP.

10891 NW 17 ST STE 143

MIAMI, FL 33172

SUBJECT: PROFESSIONAL AVIATION SUPPORT CORP.

REF: P15000075629

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and, refax the complete document, including the electronic filing cover sheet.

Please refax in portrait format not landscape.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline

Regulatory Specialist II Supervisor

FAX Aud. #: H22000413879

Letter Number: 822A00027346

2022 DEC 9 AM 8:41

714 310

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PROFESSIONAL AVIATION SUPPORT CORP.

DOCUMENT NUMBER: P15000075629

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANDREA GONZALEZ

Name of Contact Person

CORPAG REGISTERED AGENTS (USA), INC.

Firm/ Company

999 BRICKELL AVE. STE 820

Address

MIAMI, FL 33131

City/ State and Zip Code

MIASERVICES@CORPAG.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call.

ANDREA GONZALEZ

at (305) 358-7872

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2022 DEC -9 AM 8:41

FILED

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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	PSD	QUINTERO, OSCAR A	135 WESTON RD SUITE 270 WESTON, FL 33326
<input type="checkbox"/> Add			
<input checked="" type="checkbox"/> Remove			
2) <input checked="" type="checkbox"/> Change	P	Sandoval Flores, Eduardo	135 WESTON RD SUITE 270 WESTON, FL 33326
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

2022 DEC -9 AM 8:42

1111 3333

DECEMBER 8, 2022

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required
- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each 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)

Dated DECEMBER 8, 2022

Signature _____
(By a director, 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)

EDUARDO SANDOVAL FLORES

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

2022 DEC -9 AM 8:12

13054023898