

(Re	equestor's Name)		
(Ac	ldress)		
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(City/State/Zip/Phone #)			
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07/23/24--01005--015 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: RELIANCE MRO	INC	
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	·	Name of Contact Person	1
	SOFTBOOKS INC		
		Firm/ Company	
	5373 N NOB HILL RD		
	" '	Address	
	SUNRISE, FL 33351		
•		City/ State and Zip Code	2
	INFO@SOFTBOOKSINC.C	ОМ	
	•	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
		0.5.4	UT 4 60 20
ALTAF SATTAR		at (
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name o	f Corporation as currer	itly filed with the Flo	orida Dept. of State)	
P19000023128				
· · · · · · · · · · · · · · · · · · ·	(Document Number	of Corporation (if kn	own)	· · · · · · · · · · · · · · · · · · ·
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes. th	is Florida Profit Corp	poration adopts the following	g amendment(s)
A. If amending name, enter the new na	ime of the corporation:			
RELIANCE AEROSPACE INC				The new
name must be distinguishable and contain Inc.," or Co.," or the designation "C 'chartered," "professional association,"	"orp," "Inc," or "Co".	A professional corp		
• •		N/A		Ø
3. <u>Enter new principal office address,</u> Principal office address <u>MUST BE A S</u>			77	<u> </u>
			- F	
			<u> </u>	- ·
. Enter new mailing address, if appli	cable:	NT/A	· · · · · ·	ب آ
(Mailing address MAY BE A POST)		N/A		<u> </u>
				
			. 1	20
		-	(a)	
 If amending the registered agent an new registered agent and/or the new 			ter the name of the	
Name of New Registered Agent	OMAR MHANNA			
Nume of the August our right	8770 AZALEA CT APT	203		_
	(Florida	street address)		_
New Registered Office Address:	TAMARAC		. Florida 33321	
New Registered Office Address:			(Zip	

Check if applicable

.

RELIANCE MRO INC

☐ 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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	P	OMAR MHANNA	8770 AZALEA CT
Add			APT 203
Remove			TAMARAC, FL 33321
2) Change			
Add			
3) Remove			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		-	
Add			
Remove			

	(Be specific)
N/A	
· · · · · · · · · · · · · · · · · · ·	
<u> </u>	
-	
F. If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

•

The date of each amendment(s) ad	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b' document's effective date on the De	lock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amend afficient for approval.	iment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment(s	statement :):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated C	07/16/2024 S. 5	
Signature	irector, president or other officer - if directors or officers have no	t haan
selecte	d, by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	er court
	OMAR MHANNA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	