P2200000 3990

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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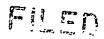
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON: INSTITUTO DOM	MINICANO DE A	AVIACIO!	N CIVIL INC
DOCUMENT NUMBER:	P2	22000003990		
The enclosed Articles of Am	nendment and fee are su	bmitted for filing	3 .	
Please return all corresponde	ence concerning this ma	tter to the follow	ing:	
		RAUL H	PEREZ	
		Name of Com		
		Name of Con	/	1
		11-1		
		\Pirm/ Cd		
	82	249 NW 36 TH ST	Γ, STE 122	2
		Addr	ess	
		DORAL F	L 33166	
		City/ State and	d Zip Cod	e
	IDА	C.MIA@IDAC.0	GOV.DO	
	E-mail address: (to be us	_		notification)
For further information cond	erning this matter, pleas	se call:		
RAUL H	PEREZ	at (786	534-3903
Name of Contact Person		at (Area Co)
Enclosed is a check for the f	ollowing amount made	navable to the Flo	orida Den:	artment of State:
	and and an and an and an	payaore to the	orida Dep	annen or butt.
☐ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filir Certified Co (Additional c enclosed)	ру	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section			Amend	Address Iment Section
Division o P.O. Box (on of Corporations entre of Tallahassee	
Tallahassee, FL 32314				N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation



INSTITUTO DOMINICANO DE AVIACION CIVIL INC 2022 OCT 26 PH 12: 24

	P22000003990	TATE VILLE STATE
(D	Document Number of Corporation (if kno	own)
ursuant to the provisions of section 607.1006, F s Articles of Incorporation:	lorida Statutes, this Florida Profit Corpu	oration adopts the following amendment(s
If amending name, enter the new name of t	the corporation:	
INSTITT	UTO DOM DE AVIACION CIVIL INC	The new
ame must be distinguishable and contain the wor Inc.," or Co.," or the designation "Corp," chartered," "professional association," or the d	"Inc," or "Co". A professional corpo	porated" or the abbreviation "Corp"
. Enter new principal office address, if appli Principal office address <u>MUST BE A STREET</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	EE BOX)	
If amending the registered agent and/or renew registered agent and/or the new regist		er the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing the hereby accept the appointment as registered ag	g Registered Agent:	

Signature of New Registered 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>	John Doe	
\underline{X} Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<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			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)		
			
			-
			
 			
		<u> </u>	
			
f an amendment provides for an exch	ange, reclassification, or cance	ellation of issued shares.	
provisions for implementing the ame (if not applicable, indicate N/A)	dment if not contained in the	amendment itself:	
- ·			

. . . .

The date of each amendment(s) adoption:date this document was signed.	, i	f other	than the
Effective date if applicable: 124, 07/2032 (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 document's effective date on the Department of State's records.	will not	be list	ed as the
Adoption of Amendment(s) (CHECK ONE)			
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action action was not required.	and shar	eholde	r
■ 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	SECRETARY OF STATE	2022 OCT 26 PH 12: 24	
(Typed or printed name of person signing)			
President			
(Title of person signing)			