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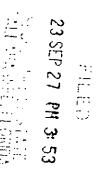
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COVER LETTER

TO: Amendment Section Division of Corporations

Amendment Section

P.O. Box 6327

Division of Corporations

NAME OF CORPO	RATION: CULLINAN PRIV	ATE JETS CORP			
DOCUMENT NUMBER: P22000093726					
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	MANUEL A KEESEE				
		Name of Contact Persor			
	CULLINAN PRIVATE JETS	S CORP.			
	Firm/ Company				
	2598 E. Sunrise Blvd., Suite 2104				
Address					
	FORT LAUDERDALE, FL 33304				
		City/ State and Zip Code	2		
	ANDY.KEESEE@GLO-JET	COM			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
ANDY KEESEE		at (407	300 9685		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check f	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)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address		Street	Address		

Amendment Section

Division of Corporations The Centre of Tallahassee

4.		_د_	1 h
	Articles of Amendment to	ن المراجعة المراجعة الم	8 %
	Articles of Incorporation		૿ૼ૱૽૾ૺૢ
CULLINAN PRIVATE JETS CORP.	of		. B
	f Corporation as currently filed with	the Florida Dept. of State)	ن کی ۔۔۔۔ کی خاند کی
222000093726	<u> </u>		
	(Document Number of Corporation	on (if known)	
Pursuant to the provisions of section 607.1 as Articles of Incorporation:	006, Florida Statutes, this Florida Pro	ofit Corporation adopts the follow	ving amendment(s) t
a. If amending name, enter the new na	me of the corporation:		
ROLLS RR CULLINAN PRIVATE JET:			The new
Inc.," or Co.," or the designation "C chartered," "professional association," B. Enter new principal office address, Principal office address,	or the abbreviation "P.A."	M/A	iain ine word
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	<u>cable:</u> <u>OFFICE BOX</u>)	N/A	
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent	v registered office address:		
)4
New Registered Office Address:		, Florida	Zip Code)
· · · · · · · · · · · · · · · · · · ·	2598 E SUNRISE BLVD SUITE 210 (Florida street address) FORT LAUDERDALE (City)	, Florida 3330	Zip Code)
		NA	
	Signature of New Registered /	Agent, if changing	

Check if applicable

 $[\]Box$ 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 Doc	<u>e</u>	
X Remove	<u>v</u>	Mike Jon	<u>ies</u>	x1/A
_X Add	<u>sv</u>	Sally Sm	nith	747
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove Change		_		
Add				
Remove				
4) Change			-	
Add				
Remove				
5) Change				
Add				
Remove				-
6) Change		_ _		
Add				
Remove				

mending or adding additional Articles, ento ach additional sheets, if necessary). (Be spe	cific)	
	N/HT	
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	1 10 d	
n amendment provides for an exchange, re ovisions for implementing the amendment	classification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	Thorotomatica in the uniquene reserv	1
	K/	/Λ
	•	
		

•	
The date of each amendmen date this document was signed	t(s) adoption: if other than the
_	SEPTEMBER 22, 2023
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	this block does not meet the applicable statutory filing requirements, this date will not be listed as the bepartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder action and shareholder
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
☐ The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
Dated	SEOT 22,2023
Signature _	
	By a director, president of their officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court
	ppointed fiduciary by that fiduciary)
	MANÚEL A KEESEE
	(Typed or printed name of person signing)
	VICE PRESIDENT/ SECRETARY