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| (Ře | equestor's Name) | | | |
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| PICK-UP | WAIT | MAIL | | |
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| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



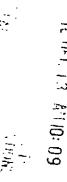
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TO: Amendment Section Division of Corporations

:

| NAME OF CORPORATION: JET ACCESSOR | ues technicians, inc | |
|---|---|--|
| DOCUMENT NUMBER: V11575 | | |
| The enclosed Articles of Amendment and fee are | submitted for filing. | |
| Please return all correspondence concerning this m | natter to the following: | |
| JONATHAN A. EWING, E | ESQ. | |
| | Name of Contact Perso | nn |
| AERO LAW CENTER | | |
| | Firm/ Company | |
| 1100 LEE WAGENER BL | VD. SUITE 312 | |
| | Address | |
| FORT LAUDERDALE, FL | · - | |
| | City/ State and Zip Coc | le |
| SERVICE@AEROLAWCENTER | ссом | |
| | ised for future annual repor | months and |
| (| - vacare amidar repor | (nouncation) |
| For further information concerning this matter, plea | se call: | |
| JONATHAN A. EWING, ESQ. | | |
| | at (| |
| Name of Contact Person | Area Co | ode & Daytime Telephone Number |
| Enclosed is a check for the following amount made | payable to the Florida Depa | artment of State: |
| ☐ \$35 Filing Fee | □\$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 | Amend Divisio Clifton | Address Iment Section on of Corporations Building |

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| | | of | | | | |
|---|--|-------------------------------------|--|----------------------|---------------------|----------------|
| JET ACCESSORIES TECHNICIANS, | INC. | | | | | |
| (Name | of Corporation as curre | ntly filed with the Florida | Dent. of State) | - | | |
| V11575 | - | | <u> </u> | | | |
| | (Document Numbe | r of Corporation (if known) | | | | |
| Pursuant to the provisions of section 60 us Articles of Incorporation: | 7.1006, Florida Statutes, th | nis <i>Florida Profit Corporati</i> | ion adopts the follow | ving ame | ndmen | t(s) to |
| A. If amending name, enter the new r | name of the corporation: | | | | | |
| name must be distinguishable and coi | utain the word "com- | | | The | new | |
| "Corp.," "Inc.," or Co" or the desig word "chartered," "professional associa | nauon vorb inc o | "To" dependence and an | corporated" or the rporation name mus | abbrevi st contai | ation n the | |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | | 13450 SW 129 St | | | | |
| | | Miami, FL 33186 | | | _2F18 | |
| | | | | Œ. | | -i |
| C. Enter new mailing address if anni | 15 t. 1 | | | - 53 2. | | |
| (Mailing address MAY BE A POST | C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | | 1771 | | EO |
| | | Miami, FL 33186 | | | <u> </u> | \Box |
| | | | | | lo: 21 | |
| D. If amending the registered agent ar new registered agent and/or the ne | <u>id/or registered office ad</u> w registered office addre | dress in Florida, enter the | name of the | <u>_</u> | _ | |
| Name of New Registered Agent | JONATHAN A. EWING | | | | | |
| | 1100 LEE WAGENER I | BLVD SHITE 312 | | _ | | |
| | | treet address) | | _ | | |
| New Registered Office Address: | FORT LAUDERDALE 33315 | | | | | |
| Secreta Office Address: | , Florida | | Code) | _ | | |
| | | | | | | |
| New Registered Agent's Signature, if c. hereby accept the appointment as regist | hanging Registered Agen ered agent. I am familiar | it: with and accept the obliga | tions of the position. | | | |
| | | /// | | | | |
| | | | | | | |

Signature of New Registered Joan of Sumain

Page 1 of 4

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 Doc | | |
|-------------------------------|-----------|---------------------|------------------------|--|
| X Remove | <u>v</u> | Mike Jones | | |
| X Add | <u>sv</u> | Sally Smith | | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s | |
| 1) Change | P | JOSEPH, SAMI | 10360 SW 139TH STREET | |
| Add | | | MIAMI, FL 33176 | |
| X Remove | | | | |
| 2) Change | V | JOSEPH, ABRAHAM | 13264 SW 104 TERRACE | |
| Add | | | MIAMI, FL 33186 | |
| X Remove | | | | |
| 3) Change | <u> </u> | KHOURY, ANTON K | 701 DESTACADA AVE | |
| Add | | | CORAL GABLES, FL 33156 | |
| X Remove | | | | |
| 4) Change | PT | MARSENISON, MATTHEW | 13450 SW 129 ST | |
| X Add | | | MIAMI, FL 33186 | |
| Remove | | | | |
| 5) Change | vs | MARSENISON, MATTHEW | 13450 SW 129 ST | |
| X Add | | | MIAMI, FL 33186 | |
| Remove | | | | |
| 6)Change | | | | |
| Add | | | | |
| Remove | | | | |

| . If amending or adding additional Arti (Attach additional sheets, if necessary). | (Be specific) |
|---|---|
| | ibe specific) |
| NIA | |
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| If an amendment provides for an excha | ange, reclassification, or cancellation of issued shares, |
| provisions for implementing the amen | idment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | |
| JIA | |
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| The date of each annual decrease. | November 23, 2018 | | |
|---|---|---|------------------|
| The date of each amendment(s) adopt date this document was signed. | ion; | , if | other than the |
| Effective date <u>if applicable</u> : Novemb | er 23, 2018 | | |
| | (no more than 90 days a | fter amendment file date) | |
| Note: If the date inserted in this block document's effective date on the Departs | does not meet the applicable sta | tutory filing requirements, this date will not b | oe listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | | |
| ■ The amendment(s) was/were adopted by the shareholders was/were sufficient | by the shareholders. The number ent for approval. | of votes cast for the amendment(s) | |
| ☐ The amendment(s) was/were approve must be separately provided for each | ed by the shareholders through voti i voting group entitled to vote sept | ing groups. The following statement wately on the amendment(s): | |
| "The number of votes cast for the | he amendment(s) was/were sufficion | ent for approval | |
| by | | ** | |
| | (voting group) | - | |
| ☐ The amendment(s) was/were adopted action was not required. | | | |
| ☐ The amendment(s) was/were adopted action was not required. | by the incorporators without share | cholder action and shareholder | |
| Dated /2 | .5.2018/ | | |
| Signature | </td <td>21</td> <td></td> | 21 | |
| (By a director selected by | or, president or other officer - if di | rectors or officers have not been f a receiver, trustee, or other court | |
| appointed fi | duciary by that fiduciary) | ratectorer, trustee, or other court | |
| | (Typed or printed name of p | J Ewing person signing) | |
| | (Title of person | of Legal | |