V11575

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(Address)				
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SECRETION OF SECRE

<u>COVER LETTER</u>

TO: Amendment Section
Division of Corporations

NAME OF CORPO	ORATION: JET ACCESSORI	ES TECHNICIANS, INC.	
DOCUMENT NUM			
	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	atter to the following:	
	MATTHEW MARSENISON	4	
		Name of Contact Persor	1
	JET ACCESSORIES TECH	NICIANS, INC.	
		Firm/ Company	
	13450 SW 129 ST		
	-	Address	
	Miami, Fl 33186		
		City/ State and Zip Code	2
	and the first and the same and the same		
	matt@jetaccessory.com	sed for future annual report	
For further information	ion concerning this matter, plea		256-9379
Name 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	□\$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)
	ailing Address		Address
Amendment Section			ment Section in of Corporations
	vision of Corporations O. Box 6327		entre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED 2021 NOV -1 AH 7:1

JET ACCESSORIES TECHNICIANS, INC.

(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
V11575	
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	Thenew
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	
D. If amending the registered agent and/or registered office ad	Idress in Florida, enter the name of the
new registered agent and/or the new registered office addre	ess:
Name of New Registered Agent	
	
(Florida	street address)
New Regimered Office Address.	. Florida
New Accomments of the Accomments.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	ent: ir with and accept the obligations of the position.
Signatura of X.m.	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 = ChiefExecutive 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>	<u>Name</u>	Address
1) N Change	V	ERNESTO LARA	13450 SW 129 STREET
Add			MIAMI, FL. 33186
Remove			
2) X Change	P.T.S	MATTHEW MARSENISON	13450 SW 129 STREET
Add			MIAMI, FL. 33186
Remove 3) Change	•		
Add			·
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			 =
6) Change			
Add			
Remove			

(Attach adi	ng or adding additional A ditional sheets, if necessary	v). (Be specific)			
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-					
	 				
					
		<u> </u>			
			_		
If an ame	ndment provides for an e	vehange reclassifie	ation or cancellati	on of issued shares.	
provision	ns for implementing the a	mendment if not co	ntained in the ame	ndment itself:	
(if no	ot applicable, indicate NA)			
	<u> </u>			·	
		-	_		
			 -	·	
		* 12 17			

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The date of each amendment(s) ac	loption:	, 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 b document's effective date on the De	ock does not meet the applicable statutory filing requirements partment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareho	lder action and shareholder
■ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the ame fficient for approval.	ndment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
Dated_ O 2 Signature	121 26 Mar	
selecte	rector, president or other officer – if directors or officers have n l, by an incorporator – if in the hands of a receiver, trustee, or o ed fiduciary by that fiduciary)	
	MATTHEW MARSENISON	
	(Typed or printed name of person signing)	
	P.T.S	
	(Title of person signing)	