P10000016551

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
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EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORE	PORATION:	Fusion Contracting Inc.		
DOCUMENT NU	MBER:	P10000016551		
The enclosed Artic	iles of Amendment and fee a	re submitted for filing.		
Please return all co	orrespondence concerning thi	s matter to the following:		
		Kathy Redyk		
	Name of Contact Person			
	API Processing			
		Firm/ Company		
	3419 G	alt Ocean Drive, Suite A		
	Ft. L	euderdale, FL 33308		
		Ity/ State and Zip Code		
	kathy@s E-mail address: (to be use	apiprocessing.com d for future annual report notification)		
For further inform	ation concerning this matter,	please call:		
	Kathy Redyk	at (954) 567-0013		
Namo	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a chec	k for the following amount n	nade payable to the Florida Department of State:		
□ \$35 Filing Fee	☑ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing A Amendmen		Street Address Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327		Clifton Building 2661 Executive Center Circle		
Tallahassee, FL 32314		Tallahassee, FL 32301		

Articles of Assemblates to Articles of Incorporation of

Fusion Contrac	ting Inc.			
(Name of Corporation as currently filed with the Florida Dept. of State)				
P10000016551				
(Document Number of Co	rporation (if known)			
Pursuant to the provisions of section 607.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following			
A. If amending name, enter the new name of the corp	oration:			
Aerotech Servi	ices Inc The new			
name must be distinguishable and contain the word abbreviation "Corp.," "Inc.," or Co.," or the designation must contain the word "chartered," "professional of the contain the word abbreviation the word abbreviation "corp.," "Inc.," or Co., " or the designation that the word "chartered," "professional of the corp.," "Inc.," or Co., " or the designation that the word "chartered," "professional of the corp.," "Inc.," or Co., " or the designation that the word "chartered," "professional of the corp.," "Inc.," or Co., " or the designation that the word "chartered," "professional of the corp.," "Inc.," or Co., " or the corp.," "Inc.," or Co., " or the chartered," "professional of the corp.," "Inc.," or Co., " or Co.,	"corporation," "company," or "incorporated" or the ion "Corp," "Inc," or "Co". A professional corporation association," or the abbreviation "P.A."			
B. Enter new principal office address, if applicable:	5970 SW 1st Court			
(Principal office address MUST BE A STREET ADDRI	Cape Coral, FL 33914			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OF FICE BOX)	PO Box 100846			
	Cace Coral, FL 33910-0846			
D. If amending the registered agent and/or registered agent and/or the new registered of	office address in Florida, enter the name of the fice address;			
Name of New Registered Agent:				
	- "			
New Registered Office Address:	(Florida street address)			
	, Florida			
	(City) (Zip Code)			
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.				
Signature	of New Registered Agent, If changing			

Page 1 of 3

If amending the Officers and/or Directors, enter the title sent and/or Director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

Title	Name	Address	Type of Action
			Add Remove
			□ Add □ Remove
			☐ Add ☐ Remove
E. If amending (attach addited)	g or adding additional Articles, enter clifonal sheets, if necessary). (Be specific	nange(s) here:	
provisions	idment provides for an exchange, recise for implementing the amendment if no applicable, indicate N/A)	ssification, or cancellation of iss t contained in the amendment i	ued shares, taclf:
			<u> </u>

The date of each amendment		
Effective date <u>if applicable</u> :	(date of adoption is required)	
enocaro date <u>il appressoro</u> .	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/we	ere adopted by the shareholders. The number of votes cast for the amendment(s	
The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following statement of 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	n	
	(voting group)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder	
	a director, president or other officer – if directors or officers have not been octed, by an incorporator – if in the hands of a receiver, trustee, or other court	
app	ointed fiduciary by that fiduciary)	
	Gail P. Hess	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	