## 722935

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nar	me)
(Do	cument Number)	
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STATE OF CARPORATIONS

C. 151/15 Sept 5, 2014

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Florida Avia	tion Trades Assoc	ciation, Inc.
DOCUMENT NUMBER: 722935		
The enclosed Articles of Amendment and fee are so	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Jenny Showali	ter	
	Name of Contact Person	1
	Firm/ Company	
400 Herndon A	Avenue	
Orlando, FL 32	Address 2803	
	City/ State and Zip Code	2
jenny@faba.aero		
E-mail address: (to be u	ised for future annual report	notification)
For further information concerning this matter, plea	se call:	
Jenny Showalter	at (407	894-7331 de & Daytime Telephone Number
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:
■ \$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 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Eassee, FL 32301



August 22, 2014

JENNY SHOWALTER 400 HERNDON AVE. ORLANDO, FL 32803 US

SUBJECT: FLORIDA AVIATION TRADES ASSOCIATION, INC.

Ref. Number: 722935

We have received your document for FLORIDA AVIATION TRADES ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 114A00018157

Carolyn Lewis Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

RECEIVED

TO: Amendment Section · Division of Corporations

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

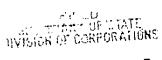
14 SEP -4 AM 10: 59

NAME OF CORPORATION:  FLORIDA AVIATION TRADES ASSOCIATION INC.  DOCUMENT NUMBER:  722935  The enclosed Articles of Amendment and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:  Teny Showalter  (Name of Contact Person)  (Firm/ Company)  400 Herndon Avenue	1 10: 5
DOCUMENT NUMBER:  722935  The enclosed Articles of Amendment and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:  Showalter  (Name of Contact Person)	STATE RATE
The enclosed Articles of Amendment and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:  Showalter  (Name of Contact Person)	.០៧ថ្ង
Tenny Showalter  (Name of Contact Person)	
Jenny Showalter (Name of Contact Person)  (Firm/Company)	
(Name of Contact Person)  (Firm/ Company)	
(Name of Contact Person)  (Firm/ Company)	
$\sim$ $\sim$ $\sim$	
400 Herndon Avenue	
Orlando, FL 32803	
(City/ State and Zip Code)	
E-mail address: (to be used for future annual report notification)	
or further information concerning this matter, please call:	
The first information concerning this matter, prease can.	
Name of Contact Person)  (Area Code & Daytime Telephone Number)	•
nclosed is a check for the following amount made payable to the Florida Department of State:	
10 \$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee	
Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy	
enclosed) (Additional Copy is	
Check # 3093 Enclosed)	
Mailing Address Amendment Section Amendment Section	

Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



14 AUG 29 PH 4: 37

FLORIDA AVIATION TRADES ASSOCIATION, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)
722935
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the cornoration:
FLORIDA AVIATION BUSINESS ASSOCIATION, INC.  The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
(1 Time upin to by the active state is a state of the sta
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
·
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent: Jenny Showalter
400 Herndon Avenue
New Registered Office Address:
Or lando, Florida 32808
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent;  I hereby accept the appointment as registered agent. I am familier will cand accept the obligations of the position.  Signature of New Jegistered Agent, if changing
1

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.

X Change	<u>PT</u>	John Doe	*
X Remove	<u>Y</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	•
Type of Action (Check One)	Title	Name	Address
1) Change	D	Sandy Showalter	P.O. Box 14073
Add			Orlando, FL 32814
Remove			
2) Change	D	Robert Showalter	P.O. Box 140753
Add			Orlando, FL 32814
Remove			
3) Change	D	Jenny Showalter	P.O. Box 140753
<b>✓</b> _ Add			Orlando, FL 32814
Remove			
4) Change	D	Christopher Lambert	P.O. Box 140753
Add			Orlando, FL 32814
Remove			
5) Change	Р	Deric Dymerskl	P.O. Box 140753
Add			Orlando, Fl 32814
Remove		t	
6) Change	D	Robert Tyler	P.O. Box 140753
Add			Orlando, FL 32814
Remove			

E. If amending or adding additional Arti-	icles, enter change(s) here:
E. If amending or adding additional Article (attach additional sheets, if necessary).	(Be specific)
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The date of each amendment(s) adoption:date this document was signed.	DIMETER CF Companyation	, if other than the
Effective date if applicable: (no more than 90	days after amendment file date)	_
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the members a was/were sufficient for approval.	nd the number of votes east for the amendment(s)	
There are no members or members entitled to vote on the adopted by the board of directors.	e amendment(s). The amendment(s) was/were	
Dated 9-1-14 Signature New 1		
(By the chairman or vice chairman of	the board, president or other officer-if directors orator – if in the hands of a receiver, trustee, or at fiduciary)	
Deric Dymer		
President	of person signing)	
(Title of person	on signing)	