365975

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TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Pompano Senior S	Squadron Flyin	g Club, Inc	
DOCUMENT NUM				
	of Amendment and fee are so	ubmitted for fil	ing.	
Please return all corre	spondence concerning this ma	atter to the follo	owing:	
	Gregory Gilhooly			
		Name of C	ontact Perso	on
	Pompano Senior Squadron F	lying Club, Inc		
		Firm/ (Company	
	1421 S Ocean Blvd Suite 10.	2		
		Ad	dress	
	Pompano Beach, FL 33062			
		City/ State a	and Zip Cod	le
	phialuh provident@amail.com			
	pbfclub.president@gmail.com E-mail address: (to be u			
For further informatio	n concerning this matter, plea		973	979-2834
Name	of Contact Person		Area Co	979-2834 de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made			
■ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43,75 Fil Certified C (Additional enclosed)	Гору	S52.50 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Pompano Senior Squadron Flying Club, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) 365975 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 (Florida street address) New Registered Office Address: (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

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 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>	<u>Addres</u> s	
1) Change	S.D	Tyler Frederick	338 NW 22nd Ave	
X Add			Boca Raton, FL 33486	
Remove				
2) Change	S.D	Gregory Worley	990 NE 27 Avenue	
Add			Pompano Beach, FL 33062	
X Remove 3.) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	(Be specific)			
	 			
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If an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, and ment if not contained	in the amendment	itself:	
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provisions for implementing the ame	nange, reclassification, and ment if not contained	I in the amendment	itself:	

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	08 September 2021
The date of each amendment(s) adoption date this document was signed.	n:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block document's effective date on the Departm	loes not meet the applicable statutory filing requirements, this date will not be listed as the ent of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted baction was not required.	by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes east for the amendment(s) at for approval.
☐ The amendment(s) was/were approved must be separately provided for each v	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the	amendment(s) was/were sufficient for approval
Majority approval of Board o	f Directors
	(voting group)
05 October, 2021 Dated Signature	Tregor Holys
selected, by a	president of other officer—if directors or officers have not been incorporator—if in the hands of a receiver, trustee, or other court iciary by that fiduciary)
Grego	ry Galyo
	(Typed or printed name of person signing)
Vice P	resident/Director
	(Title of person signing)