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Amend & M/C

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	WATERSPORTS	UPLIMITED	126
DOCUMENT NUMBER:	69905	5	
The enclosed Articles of Amendm	ent and fee are submitted for	r filing.	
Please return all correspondence co	oncerning this matter to the	following:	
CHRI	STIAN ALVIN	16305	
	(Name of Contact Person)		,
UNLI	M ITEO AVIATION (Firm/ Company)	אנר .	
1524	BAYVIEW DR (Address)	•	
For further information concerning	(City/ State and Zip Code) this matter, please call:	FLORIDA, 3	3304
Christian K (Name of Contact Person	105 at (955)	(4) 8/6 0 Code & Daytime Teleph	987
Enclosed is a check for the following		•	•
\$35 Filing Fee \$43.75 Filing Certificate of	g Fee & \$\footnote{\chi_{\text{\$43.75 Fil}}}\$ of Status Certified 6	ing Fee & Copy al copy is	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Clifton Bui	nt Section Corporations Iding rtive Center Circle	

Artic	ies of Amend	ment	20. 11.	
to to				
Articles of Incorporation				
	of		Color of C	
WATERSPORT	5 UNLI	MITED, 14	State)	
(Name of Corporation as curren	tly filed with	he Florida Dept. of	State) State	
<u> </u>	.9905	5		
(Document Numb	er of Corporati	on (if known)	-	
Pursuant to the provisions of section 607.1006, following amendment(s) to its Articles of Incorporate		tes, this <i>Florida Pro</i>	fit Corporation adopts the	
A. If amending name, enter the new name of t	the corporatio	<u>a:</u>		
UNLIMITED AVIATI	ION INC	••		
The new name must be distinguishable and "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name association," or the abbreviation "P.A."	'Inc.," or Co.	" or the designation	"Corp," "Inc," or	
B. Enter new principal office address, if applie		UNLIMIT	ED AUITHON INC.	
(Principal office address MUST BE A STREET ADDRESS) 1524 BAYVIEW DR			ZWUIEW NO	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE		ORT LAWERD!	AYVIEW DR	
		FORT (AU	DENOAUE, FL 33304	
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:	-		** - Mariella	
	1524 13	AY VIEW DR		
New Registered Office Address: (Florida street address)				
	Fort	-かりどれりれも	Florida 33304	
-	FORT LAUDER DALE (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)

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) LHRISTIAN ALVIN KJOS and EVAN BELL GREENRAUM - vice provisions for implementing the amendment if not contained in the amendment itself: (If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) CHRISTIAN ALVIN KJOS and EVAN BELL GREENRAUM - vice of the have equal ownership of unlimited aviation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	ILE PAES	EVAN BELL- GREEN BAUM	1524 BAYVIEW DR	Add
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) LHRISTIAN ALVIN KJOS and EVAN BELL GREENRAUM - vict polytope equal owners 5HIP of UNLIMITED AVIATION INC. 50% Each have equal owners 5HIP of UNLIMITED AVIATION INC. 50% Each F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (If not applicable, indicate N/A)			FORT LAUSERDALF FL	Remove
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(if not applicable, indicate N/A)				
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The date of each amendment(s	s) adoption: 2-18-2009
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/wer	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
((voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
	2-18-2009
Signature	Chunter allen Ky
	director, president or other officer — if directors or officers have not been ted, by an incorporator — if in the hands of a receiver, trustee, or other court
	inted fiduciary by that fiduciary)
	ChRISTIAN ALVIN KJOS
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)