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1. LETTELLA



## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: A-OK Jets, Inc.					
DOCUMENT NUME						
	of Amendment and fee are su	bmitted for filing.				
Please return all corres	spondence concerning this ma	tter to the following:				
	Meghan Haynes					
		Name of Contact Person	1			
	Chesnut Bradley & Hemphill, Inc.					
		Firm/ Company				
	212 S 7th Street					
	Address					
	Fort Pierce, Florida 34950					
		City/ State and Zip Code	e			
meat	nan@cbh-accounting.com					
	_	sed for future annual report	notification)			
	·	'	,			
For further information	n concerning this matter, pleas	se call:				
Meghan Haynes		at (	5956800			
Name o	of Contact Person		de & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	☐S43.75 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)			
Mailing Address		<u>Street</u>	Address			
	endment Section		ment Section			
	sion of Corporations	Division of Corporations				
P.O. Box 6327		Clifton Building				
Tallahassee, FL 32314		2661 Executive Center Circle				

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

A-OK Jets, Inc.		
(Name of Corporation	on as currently filed with the Florida I	Dept. of State)
J87394		
(Docum	nent Number of Corporation (if known)	,
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this <i>Florida Profit Corporatio</i>	n adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	." "Inc," or "Co". A professional cor,	orporated" or the abbreviation
B. Enter new principal office address, if applicable	<u> </u>	
(Principal office address MUST BE A STREET ADD		
	·- · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO.	<u></u>	
	· · ·	
D. If amending the registered agent and/or register new registered agent and/or the new registered		name of the
new registered agent and/or the new registered	once address.	
Name of New Registered Agent		
		_ <del> </del>
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg	istored Agent	Bo N
I hereby accept the appointment as registered agent.		tions of the position:
		26 287 287
Cian	ature of New Registered Agent, if changi	
Signe	uture oj trem negistereu Agent, ij changt	
		Sivie Trans
		75 <b>2</b>

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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	Joseph Miller	2011 S Perimeter Road
X Add			Suite F
Remove			Ft. Lauderdale, FL 33309
2) Change		<u> </u>	_
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)
N/A
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)
N/A

	01/01/2017	
The date of each amendment(s) :	rdoption:	, if other than the
date this document was signed.		
	01/2017	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this repartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendmen ufficient for approval.	t(s)
	oproved by the shareholders through voting groups. The following states reach voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
action was not required.	lopted by the board of directors without shareholder action and shareholder lopted by the incorporators without shareholder action and shareholder	der
action was not required.		
06/12/20	18	
Dated	4.1/	
Ciamata	/ <b>M</b>	
Signature	director, president or other officer – if directors or officers have not bee	
•	ed, by an incorporator – if in the hands of a receiver, trustee, or other co	
	nted fiduciary by that fiduciary)	ur
	Joseph Miller	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·