## V11000005516

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Village FI	yers, Inc.	
DOCUMENT NUMBER: N11000005	516	
The enclosed Articles of Amendment and fee are sub-		
Please return all correspondence concerning this matter	er to the following:	
Scott E. Charlton		
	(Name of Contact Person	)
Village Flyers, Inc.		
	(Firm/ Company)	<u> </u>
1864 Harding Path		
<u>_</u>	(Address)	
The Villages, FL 32162-3	3477	
- The second control of the second control o	(City/ State and Zip Code	*)
scottcfii@century		
E-mail address: (to be used	for future annual report r	notification)
For further information concerning this matter, please	call:	
Scott Charlton	<sub>at (</sub> 352	603-7535
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment 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 ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Village Flyers, Inc.				
(Name of Corporation as current	ly filed with the Flo	orida Dept. of State)		
N11000005516				
(Doct	ument Number of Co	orporation (if known)		
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporate		es, this Florida Not For Profit Corporate	ion adopts the f	ollowing
A. If amending name, enter the new na	me of the corporat	<u>ion:</u>		
N/A		•		The new
name must be distinguishable and contain		tion" or "incorporated" or the abbrevia		
<u>"Company" or "Co." may not be used in</u>	the name.			
B. Enter new principal office address, i	if applicable:	N/A		
(Principal office address <u>MUST BE A ST</u>	TREET ADDRESS	)		
C. Enter new mailing address, if applications (Mailing address MAY BE A POST C		N/A		
D. If amending the registered agent and	d/or registered offic	ce address in Florida, enter the name o	of the	
new registered agent and/or the new				
Name of New Registered Agent:	N/A			
		(Florida street address)		
New Registered Office Address:		•		
		, Florida		
	(City)		(Zip Code)	
New Registered Agent's Signature, if ch	nanging Registered	Agent:		
I hereby accept the appointment as registe			the position.	
			<b>4</b>	
<del></del>	Signature of New	Registered Agent, if changing		<del>5</del>
	,	Dogo 1 of 4		AP

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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 <math>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 X Remove X Add	PT John Do Y Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	STC	Scott E. Charlton	1864 Harding Path
Add			The Villages, FL
Remove	•		32162
2) Change	PD	Stanley H. Carpenter	1828 Harding Path
X Add			The Villages, FL
Remove			32162
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
•			
Add			
Remove		D 0.61	

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
N/A	
•	
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The date of each amendmen		, if other than the
late this document was signed.  Effective date <u>if applicable:</u>	NI/A	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/ was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) approval.	
There are no members o adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated	6 APR 2015	
Signature	In H Duck	
	e chairman or vice chairman of the board, president or other officer-if directors	
	not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
Tomas	s H. Buchanan	
<del></del>	(Typed or printed name of person signing)	
Chairn	nan of the Board of Directors	
	(Title of person signing)	