N1400000 9125

(Req	uestor's Name)		
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Flori Ao.	flight eliterine	
DOCUMENT NUMBER: N 140000	009125	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Dea	Name of Contact Person)	
-	(Name of Contact Person)	
Floric	12 Flight Flite inc	
	(Firm/ Company)	
7.220	SW1ZST Dre (Address)	
	(Address)	
MICAN	OCC FL 33027 (City/ State and Zip Code)	
	(City/ State and Zip Code)	
de	and henco.com	
E-mail address: (to be used	for future annual report notification)	
For further information concerning this matter, please	eall:	
Dean Berry	(Area Code) (Daytime Telephone Number)	
(Name of Contdet Person	(Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State:	
Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address	Street Address	
Amendment Section Division of Corporations	Amendment Section	
P.O. Box 6327	Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

Articles of Incorporation
یے
Name of Corporation as currently filed with the Florida Dept. of State) N14000009125
(Name of Corporation as currently med with the Piorida Dept. of State)
N14000000177
(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 corporation: 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)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)
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:
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 Doc 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.

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Example: X Change X Remove A Add	PT John De V Mike Je SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add	DIR	Trent Joseph	Go Box 210782 West Valm Brach FL 33421
X Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			_
5) Change Add			
Remove			
6) Change Add			
Remove E. If amending or adding	og additional Art	Page 2 of 4 ticles, enter change(s) here:	
(attach additional shee			
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Page 3 of 4	
The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s)	

was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated Feb 21, 2020
Signature
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Dean Berry
(Typed or printed name of person signing)
5000
(Title of person signing)