N38912

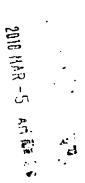
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ΓΟ: Amendment Section Division of Corporation	ns				
NAME OF CORPORATION	FLYING GATORS	, INC			
DOCUMENT NUMBER:	N38912				
The enclosed Articles of An	nendment and fee are sub	mitted for filing.			
Please return all corresponde	ence concerning this matt	er to the following:			
THOMAS M. STOLL					
		(Name of Contact Po	erson)		
FLYING GATORS, INC.					
		(Firm/ Company	y)		
PO BOX 580					
		(Address)			
BRONSPN, FL 32621-058	0				
		(City/ State and Zip	Code)		
TOMSTOLL@ATT.NET					
E	-mail address: (to be use	d for future annual rep	port notification)	<u> </u>
For further information cond	erning this matter, please	call:			
THOMAS M. STOLL		at	352	486-3012	
	(Name of Contact Persor		(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the f	ollowing amount made p	ayable to the Florida l	Department of S	State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi is Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing A	<u>address</u>	Str	reet Address		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FLYING GATORS, INC.

Articles of incorporation of	
prporation as currently filed with the Florida Dept. of State)	750

(Name of Corporation as	currently filed with the Florida Dept. of State)
N38912	
(Document	nt Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the co	erporation:
	The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicables (Principal office address MUST BE A STREET ADD	
(rrincipal office duaress <u>most be A Street ADD</u>	<u></u>
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO)	<u>X</u>)
D. If amending the registered agent and/or register	
new registered agent and/or the new registered of	office address:
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address:	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi	istered 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 X Remove X Add	<u>V</u> <u>Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>s</u>	STEVE HILMES	1310 SW 81ST TERR
Add			GAINESVILLE, FL 32608
Remove			
2) Change	<u> </u>	RANDY HUNT	4416 SW 103 Ct.
X Add			GAINESVILLE, FL 32608
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			***
Add			
Remove			
6) Change			
Add			
Remove		D	

. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
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					. <u></u>	

	JANUARY 6, 2018	
The date of each amendment(date this document was signed.		, if other than the
Effective date if applicable:	JANUARY 6, 2018	
	(no more than 90 days after amendment file date)	
	is block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.	
There are no members or adopted by the board of d	members entitled to vote on the amendment(s). The amendment(s) was/were irectors.	
Dated	CH 1, 2018	
Signature	homas M Sull	
have no	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)	
THO	OMAS M. STOLL	
	(Typed or printed name of person signing)	
TRI	EASURER, FLYING GATORS, INC.	
	(Title of person signing)	