

| (Re                     | questor's Name)   |           |
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| PICK-UP                 | WAIT              | MAIL      |
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|                         |                   |           |
| (Do                     | cument Number)    |           |
|                         |                   |           |
| Certified Copies        | Certificates      | of Status |
|                         |                   |           |
| Special Instructions to | Filina Officer    |           |
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SECRETARY OF STATE

DEC 31 2013

R. WHITE

## **COVER LETTER**

| Division of Corpor  | rations                                    |  |  |
|---|--|--|--|
| NAME OF CORPORA   | ATION: $G + G$ ER: $P03000$                | Towe fly Se  | ervices Inc.   |
| DOCUMENT NUMBI  | er: <i>P03000</i>                          | 012556   |  |
| The enclosed Articles of  | f Amendment and fee are su                 | ibmitted for filing.   |  |
| Please return all corresp   | ondence concerning this ma                 | atter to the following:  |  |
| _   | Norb                                       | ert Suhaja   | ,<br>a   |
| _   |  | Name of Contact Person   | n  |
|   | 6+6  | Towerfly Serv  | lies, Inc.   |
| _   |  | Firm/ Company  |  |
| _   | 72 /                                       | Wynn field<br>Address  | Drive  |
|   |  | Address  |  |
| _   | Palm                                       | Coast, FC City/ State and Zip Code                                 | 32164  |
| _   |  | City/ State and Zip Code   | e  |
|   | norber                                     | t. S@ tower  | the Cam  |
| E-mail address: (to be used for future annual report notification)                            |  |  |  |
|   |  | •  | ·  |
| For further information of  | concerning this matter, pleas              | se call:   |  |
| Norbert Suhajda at 386 864-0740   |  |  |  |
| Name of   | Contact Person                             | Area Co  | de & Daytime Telephone Number  |
| Enclosed is a check for the following amount made payable to the Florida Department of State: |  |  |  |
| □ \$35 Filing Fee   | \$43.75 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) |
|   | ng Address                                 | Street   | Address  |

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

TO: Amendment Section

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

## **Articles of Amendment**

to

| Articles of Incorporation of   | FILED                                       |
|--|---|
| G+G Tower fly Services   | Inc 13 DEC 19 FH 3:33                       |
| (Name of Corporation as currently filed with the Florida Dept. of State) | - SECRETARY OF N-                           |
| P03000012556   | SECIVETARY OF STATE<br>TALLAHASSEE, FLORIDA |

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

| ame must be distinguishable and contain<br>Corp.," "Inc.," or Co.," or the designation<br>ord "chartered," "professional association | on "Corp," "Inc," or "Co".  A profess | The 'incorporated' or the abbre ional corporation name must conte |
|--|---------------------------------------|---|
| . Enter new principal office address, if a Principal office address MUST BE A STR.   | pplicable:<br>EET ADDRESS )           |   |
|  | ·                                     |   |
| Enter new mailing address, if applical (Mailing address MAY BE A POST OF   |                                       |   |
|  |                                       |   |
|  |                                       |   |
| If amending the registered agent and/onew registered agent and/or the new r  |                                       | enter the name of the   |
| Name of New Registered Agent   | Nonbert Suhajo                        | la  |
|  | 72 W 6:1/1                            | Orice   |
|  | 12 DynnFletor                         |   |
|  | Pulm Loas +                           | , Florida 32/64   |

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          | <u>PT</u> .       | John Doe        |                                     |
|----------------------------|-------------------|-----------------|-------------------------------------|
| X Remove                   | <u>V</u> <u>j</u> | Mike Jones      |                                     |
| X Add                      | <u>sv</u>         | Sally Smith     |                                     |
| Type of Action (Check One) | <u>Title</u>      | <u>Name</u>     | <u>Addres</u> s                     |
| 1) Change                  | <u></u>           | Gabor Varadi    | 72 Wynnfield Dr.<br>Pulm Coast, FC  |
| Remove                     | 0                 |                 | 32164                               |
| 2) Change                  |                   | Norbert Suhajda | 72 Wynntield Dies<br>Palm Cocot, FC |
| Remove 3) Change           |                   | <del></del>     | 32/44                               |
| Add                        |                   |                 |                                     |
| 4) Change                  |                   |                 |                                     |
| Remove                     |                   |                 |                                     |
| 5) Change                  |                   |                 |                                     |
| Remove                     |                   |                 |                                     |
| 6) Change                  |                   |                 |                                     |
| Remove                     |                   |                 |                                     |

| f amending or adding additional Arti<br>Attach additional sheets, if necessary). | (Be specific)       |                    | •                |             |
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| f an amendment provides for an exch  | anga madagaifiaati  | on or concellation | of iccurd shares |             |
| provisions for implementing the ame  | ndment if not conta | ined in the amend  | ment itself:     |             |
| (if not applicable, indicate N/A)  |                     |                    |                  |             |
|  |                     |                    |                  |             |
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| The date of each amendment(s) acd the this document was signed. | loption: Necenber 3, 2013   | , if other than the |
|---|---|---------------------|
| Effective date <u>if applicable:</u>                            |   |                     |
|   | (no more than 90 days after amendment file date)  |                     |
| Adoption of Amendment(s)  | (CHECK ONE)   |                     |
| The amendment(s) was/were ado by the shareholders was/were sur  | pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.  |                     |
| The amendment(s) was/were app must be separately provided for   | roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): |                     |
| "The number of votes cast                                       | for the amendment(s) was/were sufficient for approval   |                     |
| by  | (voting group)  |                     |
|   | (voting group)  |                     |
| The amendment(s) was/were ado action was not required.          | pted by the board of directors without shareholder action and shareholder   |                     |
| The amendment(s) was/were ado action was not required.          | pted by the incorporators without shareholder action and shareholder  |                     |
| Dated   | 2/3/2013  |                     |
| Signature $igg>$  | Sur Gr  |                     |
| (By a d   | rector, president or other officer - if directors or officers have not been   |                     |
|   | d, by an incorporator – if in the hands of a receiver, trustee, or other court red fiduciary by that fiduciary)                             |                     |
|   | Gubor Varadi  |                     |
|   | (Typed or printed name of person signing)   | <del></del>         |
|   | President   |                     |

(Title of person signing)