## P03000064318

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## **COVER LETTER**

TO: Amendmen@Section Division of Corporations NAME OF CORPORATION: FlashPowered, Inc. DOCUMENT NUMBER: P03000064318 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: James DiEdwardo Name of Contact Person FlashPowered, Inc. Firm/ Company 1818 18th Lane Address Greenacres, FL 33463 City/ State and Zip Code jim@flashpowered.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 561 ) 319-8532

Area Code & Daytime Telephone Number James DiEdwardo Name of Contact Person

Enclosed is a check for the following amount made payable to the Florida Department of State:

□\$43.75 Filing Fee &

Certificate of Status

**Mailing Address** 

■ \$35 Filing Fee

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

Street Address

□\$43.75 Filing Fee &

(Additional copy is

Certified Copy

enclosed)

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

□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

## Articles of Amendment to Articles of Incorporation of

. . .

FlashPowered, Inc.	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P03000064318	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Aerial Infographics, Inc.	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "P.	" "company," or "incorporated" or the abbreviation  ". A professional corporation name must contain the
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 BOX)	20181 25
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	(address)
New Registered Office Address:	, Florida
(C	ity) (Lip Code)
New Registered Office Address:	, Florida
Signature of New Reg	istered 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: XChange	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jor	nes	
X Add	<u>sv</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				-0-
2) Change		_		
Add				
Remove				
3 ) Change				<del></del>
Add				
Remove				
4) Change				
Add				
Remove				<del></del>
5) Change				
Add				
Remove				
6) Change				
Add				<del> </del>
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
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provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 day	vs after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The num by the shareholders was/were sufficient for approval.	aber of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes cast for the amendment(s) was/were suf	licient for approval
by	· · · · · · · · · · · · · · · · · · ·
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors with action was not required.	out shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators without s action was not required.	chareholder action and shareholder
03/19/2019 Dated	_
Signature Janus , leer	
(By a director, president or other officer –	if directors or officers have not been
selected, by an incorporator - if in the han	
appointed fiduciary by that fiduciary)	
James DiEdwardo	
(Typed or printed name	of person signing)
DPST	
(Title of pe	rson signing)