## P05000092016

(Re	equestor's Name)	·
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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Amend

OCT 1 5 2012

T. LEWIS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: FLY BY CO	RPORATION			
DOCUMENT NUMBER: 90500009216				
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this man	tter to the following:			
LUIS C. NINO				
FLY BY CORPOR	Name of Contact Person			
	Firm/ Company			
1001 WEST CYP	RESS CREEK F	ROAD, SUITE 320-I		
	Address			
FORT LAUDERD	ALE FLORIDA	33309		
	City/ State and Zip Code			
	·	•		
LUIS@FLYBYCORP	COM			
E-mail address: (to be us	sed for future annual report	notification)		
For further information concerning this matter, pleas	se call:			
LUIS C. NINO	786	, 206 0473		
Name of Contact Person	at (	de & Daytime Telephone Number		
		•		
Enclosed is a check for the following amount made	payable to the Florida Depa	ertment of State:		
\$35 Filing Fee \$\times \$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)		
Mailing Address	Street	Address		
Amendment Section		Amendment Section		
Division of Corporations		on of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		Building executive Center Circle		

Tallahassee, FL 32301

## **Articles of Amendment** , to **Articles of Incorporation**

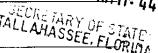
FILED

FLY BY CORPORATION

2012 OCT 12 AM 11: 44

(Name of Corporation as currently filed with the Florida Dept. of State)

90500009216



(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

N/A				
ame must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designa vord "chartered," "professional associati	tion "Corp," "Inc," or	"Co". A profess	or "incorporated" or the a ional corporation name must	
B. Enter new principal office address, if	if applicable: TREET ADDRESS )	1001 WEST	1001 WEST CYPRESS CREEK ROAD	
Principal office address <u>MUST BE A ST</u>		SUITE 320 - I		
		FORT LAUE	DERDALE, FLORIDA, 33309	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		1001 WEST CYPRESS CREEK ROAD		
		SUITE 320 - I		
		FORT LAU	DERDALE, FLORIDA, 33309	
If amending the registered agent and new registered agent and/or the new			enter the name of the	
new registered agent and/or the new  Name of New Registered Agent	registered office addre LUIS C. NINO 1001 WEST CYPRESS	CREEK ROAD, S	UITE 320 - I	
new registered agent and/or the new  Name of New Registered Agent	LUIS C. NINO  1001 WEST CYPRESS  (Florida s	CREEK ROAD, S Treet address)	<u></u>	

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	PT John Do	<u>oe</u>	
X Remove	V Mike Jo	ones	
X Add	SV Sally Si	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change	PRE-DIR	LUIS C. NINO	1001 WEST CYPRESS CREEK ROAD
Add			SUITE 320 - I
Remove			FORT LAUDERDALE, FLORIDA, 33309
2)\ Change	VP	MARIA L. DE HOZ	1001 WEST CYPRESS CREEK ROAD
Add			SUITE 320 - I
Remove			FORT LAUDERDALE, FLORIDA, 33309
3) X Change	TRE	LUIS A NINO	1001 WEST CYPRESS CREEK ROAD
Add			SUITE 320 - I
Remove			FORT LAUDERDALE, FLORIDA, 33309
4) Change Add Remove			
5) Change			
Remove  6) Change  Add  Remove			
<i></i>			

	l sheets, if necessary)	). (Be specific)			
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an amandman	t provides for an ex	vahanga raalassi	fication or cance	Hatian of issued:	chares
an amenumen rovisions for i	implementing the an	mendment if not	contained in the	amendment itself	:
(if not appli	icable, indicate N/A)				_
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The date of each amendmen	t(s) adoption: SEPTEMBER 26, 2012
Effective date <u>if applicable</u> :	SEPTEMBER 26, 2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):
"The number of vote	es cast for the amendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated SE	PTEMBER 26, 2012
S	By a director, president of other officer – if directors or officers have not been selected, by an incorporator if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	LUIS C. NINO
	(Typed or printed name of person signing)
	PRESIDENT & DIRECTOR
	(Title of person signing)