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JUL 2 4 2017 R. WHITE

## COVER LETTER

**TO:** Amendment Section Division of Corporations

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NAME OF CORPOR	ATION: LAV Services, Inc	, <u>, , - , </u>	
DOCUMENT NUMB		<u>-</u> .	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Sabrina Satler		
•		Name of Contact Person	1
		Firm/ Company	
	1590 Old NDB Road		
•		Address	
	Deland, FL 32724		
		City/ State and Zip Cod	e
Sabrir ———	a@Flexaeropainting.com		
<del></del>	E-mail address; (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Sabrina Satler		954 at (	292-7696
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Ame Divi: P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Innent Section on of Corporations Building Executive Center Circle assec, FL 32301

## Articles of Amendment to Articles of Incorporation of

LAV Services, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P06000002518 (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: A. If amending name, enter the new name of the corporation: Flex Aero Aircraft Painting and Interior, Inc. The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 1590 Old NDB Road B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Deland, FL 32724 C. Enter new mailing address, if applicable: 1590 Old NDB Road (Mailing address MAY BE A POST OFFICE BOX) Deland, FL 32724 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 (Florida street address) New Registered Office Address: \_. Florida (City) (Zip Coder 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.

Page Lof 4

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.

X Change	<u>PT</u>	John Do	<u>oc</u>			
X Remove	$\underline{V}$	Mike Jones				
<u>X</u> Add	<u>\$V</u>	Sally Sn	<u>nith</u>			
Type of Action (Check One)	Title		<u>Name</u>		<u>Addres</u> s	
1) Change						
Add						
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2) Change		_				
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3 ) Change		_				
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4) Change		_				
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5) Change						
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The date of each amendment(s)	doption:, if other	than the
date this document was signed.		
Effective date <u>if applicable</u> :	ino more than 90 days after amendment file date)	
	ino more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will not be listed epartment of State's records.	d as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were as by the shareholders was/were:	dopted by the shareholders. The number of votes east for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	lopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	lopted by the incorporators without shareholder action and shareholder	
07/18/20 Dated	7	
Signature	TR	
íBy a selec	director, president or other officer – if directors or officers have not been ed. by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	Sabrina Satler	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	