## P06000117651

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	· #)
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10/24/12--01002--028 \*\*35.00

12 OCT 24 PM 1:17

Amend 10/24/12

## **COVER LETTER**

TO: Amendment Section

**Division of Corporations** NAME OF CORPORATION: ClovAir Inc. DOCUMENT NUMBER: P06000117651 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: James Agnello Name of Contact Person ClovAir Inc. Firm/ Company 4812 Lakeland Harbor Circle Address Lakeland, Florida 33805 City/ State and Zip Code agnello1979@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: James Agnello Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



ClovAir Inc			- · · · · · · · · · · · · · · · · · · ·
(Name of Corporation as current	ly filed with the Florida Dept. of	State)	
206000117651			<u> </u>
(Document Number	er of Corporation (if known)		
ursuant to the provisions of section 607.1006, Flors Articles of Incorporation:	orida Statutes, this <i>Florida Profit C</i>	Corporation adopts the follow	ing amendmen
. If amending name, enter the new name of th	e corporation:		
			The new
ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "Coord "chartered," "professional association," or	Corp," "Inc," or "Co". A profess	" or "incorporated" or the sional corporation name mus	abbreviation it contain the
B. Enter new principal office address, if applic Principal office address <u>MUST BE A STREET</u>	able: 4DDRESS)		<del></del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	(BOX)		
			<del></del>
). If amending the registered agent and/or reg	istered office address in Florida,	enter the name of the	
new registered agent and/or the new register	red office address:		
Name of New Registered Agent			
	(Florida street address)		
		, Florida	
New Registered Office Address:	(City)	(Zip Code)	<del></del>

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)

Example:

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 Doe	
X Remove	<u>y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Scott Agnello	4812 Lakeland Harbor Circle
X Add		<del></del>	Lakeland, Florida 33805
Remove			
2) Change	VP	Christopher Grant	4812 Lakeland Harbor Circle
X			Lakeland, Florida 33805
Remove			
3) Change		·-	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

	onal sheets, if i	necessary).	(Be specific)	ange(s) here:		
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f an amendi	ment provides	for an excha	inge, reclassi	ification, or canc	ellation of issued	shares,
provisions f	<u>for implementi</u>	ing the amen	inge, reclass dment if not	ification, or canc contained in the	ellation of issued amendment itse	shares, lf:
provisions f (if not a	ment provides for implementi applicable, indic	ing the amen	nge, reclass dment if not	fication, or canc contained in the	ellation of issued amendment itse	shares, f:
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provisions f	<u>for implementi</u>	ing the amen	ange, reclass	ification, or canc	ellation of issued amendment itse	shares,

The date of each amendment	t(s) adoption: October 15th, 2012
Effective date <u>if applicable</u> :	October 15th, 2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/web by the shareholders was/web.	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
Dated Oct	tober 22nd 2012
(E	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court prointed fiduciary by that fiduciary)
	James Agnello
	(Typed or printed name of person signing)
	President
	(Title of person signing)