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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPO	RATION: Skydive Florida K	leys, Inc.		
	BER: P07000083951			
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	Susan A Burbank			
		Name of Contact Person	1	
	Skydive Florida Keys, Inc.			
		Firm/ Company		
	17046 Bonita Lane W			
		Address		
	Summerland Key FL 33042-	-3617		
		City/ State and Zip Cod	e	
susa	nburbank@rocketmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	on concerning this matter, pleas	se call:		
Susan A Burbank		at (853-6969	
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check for	or 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)	
Am Div P.C	illing Address endment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

17 AUG 15 AH II: 39

Skydive Florida Keys Inc		ALL MOD TO MITTING
(Name	of Corporation as currently	v filed with the Florida Dept of State)
P97000083931 P0706008	3951	A
	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this a	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new n	ame of the corporation:	
		The new
	nation "Corp." "Inc." or "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the P.A."
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>		17046 Bonita Lane W Summerland Key FL 33042
D. If amending the registered agent ar new registered agent and/or the ne		
Name of New Registered Agent	17046 Bonita Lane W	
	(Florida stre	vet address)
S D to LOGS (II	Summerland Key	33042
New Registered Office Address:		City) (City) (Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent:	, ,

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:

(Aftach 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	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	РТ	Franklin E Murphy, Jr.	1213 Georgia St
Add			Key West FL 33040
x Remove			
2) Change	PT	Susan A Burbank	17046 Bonita Lane W
X Add			Wummerland Key FL 33042
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			·
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	g or adding addition itional sheets, if neces	sary). (Be specij	lic)		
					
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<u>t an amen</u>	dment provides for a s for implementing th	<u>in exchange, recla</u> he amendment if r	ssification, or cand	<u>cellation of issued s</u> e amendment itself	<u>nares,</u>
provision	t applicable, indicate i	N/A)	or contained in the	<u> </u>	<u>-</u>
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	06/19/2017	10 1
The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
	(19/2017	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more man 39 days after amenament fre date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this deepartment of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(ufficient for approval.	s)
	proved by the shareholders through voting groups. The following statem reach voting group entitled to vote separately on the amendment(s):	ent
"The number of votes case	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and sharehold opted by the incorporators without shareholder action and shareholder	er
selecte	lirector, 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 counted fiduciary by that fiduciary)	
	Susan A Burbank	
	(Typed or printed name of person signing)	
	Personal Representative of Franklin E Murphy, Jr. Estate	
	(Title of person signing)	

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