

# 010000051497

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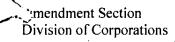
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SECRETARY OF STATE STATE OF CORPORATIONS
IN AUG 15 AH II: 17

Arnen Di N.C. C.COULLIETTE AUG 15 2011 EXAMINER

# COVER LETTER



NAME OF CORF	ORATION: DELEG	N AVAITION INC	<u>.</u>
		in the second of	
DOCUMENT NU	MBER: P10000051497	* 0.0	
The enclosed Artic	les of Amendment and fee a	re submitted for filing.	
ese return all co	rrespondence concerning thi	s matter to the following:	
£	John F Ellenberg		
		ame of Contact Person	
•	••	c. co	
•			
•		Firm/ Company	<del></del>
•	4465 State Rd 11		
,		Address	
•			
·	j∂eLeon Springs, Fl	32130	
		ty/ State and Zip Code	
4	:		
· 7	deleonaviation@gmail	COM I for future annual report notification)	
	E-mail address: (to be used	for future annual report notification)	
For further informa	tion concerning this matter,	please call:	
John F. Elle	nberg	at ( 386 ) 956-052	21
	of Contact Person	Area Code & Daytime Tele	
Enclosed is a check	for the following amount m	ade payable to the Florida Depart	ment of State:
MAS Filing Foo	D 042 75 Diling Dag 9	De42 75 Piling For 9	Tiggs so Elling For
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy	☐ \$52.50 Filing Fee Certificate of Status
		(Additional copy is enclosed)	Certified Copy
			(Additional Copy is enclosed)
Mailing Address S		Street Address	
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
		Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	e

Tallahassee, FL 32301



### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 5, 2011

JOHN F. ELLENBERG 4465 STATE RD 11 DELEON SPRINGS, FL 32130

SUBJECT: DELEON AVAITION INC

Ref. Number: P10000051497

We have received your document for DELEON AVAITION INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must have original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 811A00018482

## Articles of Amendment to Articles of Incorporation of

DELEON A	VAITION INC		
(Name of Corporation as curre	ently filed with the Florida	Dept. of State)	
P10000051497			
(Document Num	nber of Corporation (if know	vn)	
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this Flo	orida Profit Corporation a	dopts the following
A. If amending name, enter the new name of	f the corporation:		
DELEON AVIATIO	ON INC		The new
name must be distinguishable and contain is abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "Corp," "Inc,	" or "Co". A professiona	ated" or the l corporation
B. Enter new principal office address, if app	licable:		<u> </u>
(Principal office address MUST BE A STREE	T ADDRESS )		<u>₹</u>
			AUG
	<del></del>		_ G PA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)			ISLON OF CORPORATION IT AUG 15 AMII: 17
D. If amending the registered agent and/or r new registered agent and/or the new regis		Florida, enter the name o	f the
Name of New Registered Agent:			
New Registered Office Address:	(Florida street ad	idress)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changin			
I hereby accept the appointment as registered as	gent. I am familiar with an	d accept the obligations of	the position.

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	Albert T Cooper	1589 Austin Lane St Augustine, F1 32029	☐ Add  ☐ Remove
			☐ Add ☐ Remove
<del></del>			☐ Add ☐ Remove
E. If amending (attach addit	g or adding additional Articles, enter ional sheets, if necessary). (Be specif	change(s) here:	
provisions	dment provides for an exchange, recl for implementing the amendment if napplicable, indicate N/A)		

The date of each amendment	(s) adoption: August 1, 2011
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	cast for the amendment(s) was/were sufficient for approval
by	27
	(voting group)
action was not required.	re adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
Signature(By select	gust 1, 2011  Addirector, president or other officer – if directors or officers have not been beed, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	John F. Ellenberg (Typed or printed name of person signing)
	President
	(Title of person signing)