Florida Department of State Division of Corporations

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COR AMND/RESTATE/CORRECT OR O/D RESIGN LEGION AERO, INC.

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COVER LETTER

08/14/2013 13:16 4 9543840017

TO: Amendment Section Division of Corporations NAME OF CORPORATION; Legion Aero, Inc. P10000088838 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Alex P. Rosenthal Name of Contact Person Rosenthal Law Group Firm/ Company 3701 SW 47th Avenue Address Weston, FL 33326 City/ State and Zip Code alex@rosenthalcounsel.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Alex Rosenthal 、384-9200 Name of Contact Person Enclosed is a check for the fullowing amount made payable to the Florida Department of States ☐\$43.75 Piling Fee & ■ \$35 Filing Fcc □\$43.75 Filing Foc & □\$52_50 Filing Ree Certificate of Status Cartified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is circlosed) Malling Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 Tallahassec, FL 32314 2661 Executive Center Circle

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Articles of Amendment

to Articles of Incorporation of

13 AUG 14 PM 2: 38 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Legion Aero, Inc.

| (Name of Corporation as | carrestly filed with the Flor | rida Dent. of State) | | |
|--|---------------------------------|--|--|------------------------|
| P10000088838 | | | | |
| (Document | nt Number of Corporation (if k | понт | | • |
| Pursuant to the provisions of section 607, its Articles of Incorporation: | 1006, Florida Statutes, this Fl | orida Profit Corporation | actopes the following a | emendment(s) to |
| A. If amonding name, enter the new no | une of the enrocations | | | |
| | - | | | the new |
| name must be distinguishable and can "Corp.," "Inc.," or Co.," or the design word "chartered." "professional association | ration "Corp," "Inc," or "Ci | ". A professional corpo | nor cled" or the ab b Yddion name must cu | reviation ntain (he |
| B. Enter new principal office address, (Principal office address MUST BE A \$ | | , , , , _ , _ , _ , _ , _ , _ , _ , _ , | | |
| C. Enter new mailing address, if apple (Mailing address MAY BE A POST) | i <u>cable:</u> OFFICE BOX) | | | |
| D. If adjusting the registered agent appropriate of the new registered agent ant/or the new | dior registered office address: | ıs in Florida, enter the po | une of the | |
| Name of New Replacered Assent | Warren Timney, | lr. | | |
| | 3701 SW 47th Av | enue, Suite 104 | 4 | |
| | (Florida tirae | • | _ | |
| New Registered Office Address: | | , Florid | _a 33314 | |
| | (City) | | (Zip Code) | |
| | Janes Limited | h | vns of the position. | |
| 54 | mature of New Registered Age | ent. If chanving | | |

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If sincuding the Officers and/or Directors, cuter the title and same of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Assach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

 $P = President; V: Vice President; T = Treatment; S: Secretary; D = Director; TR = Trustee; C \in Chairman or Clerk; CEO \in Chief Exacutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each affice hold. President, Treatment, Director would be PTD.$

Changes should be noted in the following manner. Currently John Doe is fished as the PST and Mike Jones is listed as the Y. There is a change, Mike Jones leaves the corporation, Solly Smith is named the V and S. These should be noted as John Doe, PT as a Change, blike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

| X_Chango | LL Jupi | 1.1706 | • |
|---------------------------------------|---------------------|--------------------|---------------------|
| X Remove | <u>v</u> <u>Mik</u> | a Johns | |
| _X Add | SV Sall | y Smith | |
| <u>l'ype of Action</u> (Check One) | <u>Title</u> | Name | Address |
| 1) Change | VP | Robert Amar | 3701 SW 47th Avenue |
| Add | | | Suite 104 |
| X Remove | | | Davie, FL 33314 |
| 2) X Change | PST | Warren Timney, Jr. | 3701 SW 47th Avenue |
| X Add | | | Suite 104 |
| Kemove | | | Davie, FL 33314 |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4)Change | | | |
| Add | | | |
| Rcmova | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | Name |
| 6)Change | | | |
| Add | | | |
| Remove | | | |
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| tach <i>additional shee</i> | ng additional Arti | (Be specific) | | | |
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13 AUG 14 PM 2: 22

| SFCB55 SFCB55 |
|--|
| This date of each amendment(s) adoption: August 13, 2013 TALLAHASSEE, FLORIDA This date this disconnectives signed. |
| that this document was signed. |
| Effective date if appetiteable: August 13, 2013 |
| (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) (CLIRCK ONE) |
| The monodment(s) was fivere adupted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval. |
| The amendment(s) vastivers approved by the shareholders through voting groups. The following statement must be separately provided for each voting group antified to role separately on the amendment(s): |
| "The number of votes cast for the amendment(s) was were sufficient for approval |
| hy |
| (roting group) |
| The amendment(s) vers/were adopted by the board of directors without absreholder action and shareholder action was not required. |
| The amendment(a) was/were adopted by the incorporators without shareholder action and shareholder action was not required. |
| DMEU 8/13/13 |
| Signature Warren Timner h |
| (By a director, president or 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) |
| Warren Timney, Jr. |
| (Typed or printed name of person signing) |
| Director/President |
| (fittle of person signing) |