## P10000099513

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2012 JUL -2 AM 11: 59
SECRETARY OF STATE
SECRETARY OF STATE

Flovio Scotton 9 due permession to add himselp as director

manager

## **COVER LETTER**

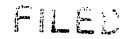
**TO:** Amendment Section

**Division of Corporations** 

NAME OF CORPORATION: SKY AIR GLOBAL, INC DOCUMENT NUMBER: P10000099573 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RODGER C SCOTTOM Name of Contact Person SKY AIR GLOBAL, INC Firm/ Company 7797 Golf Circle Dr # 204 Address Margate,FI - 33063 City/ State and Zip Code flavioscotton@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Flavio Scotton Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$52.50 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) 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 Articles of Incorporation**



## SKY AIR GLOBAL, INC

2012 JUL -2 AM 11: 59

(Name of Corporation as currently filed with the Florida Dept. of State)

SECRETARY OF STATE

D1000000573

ent(s) to

(D		
(Document	Number of Corporation (i	f known)
rsuant to the provisions of section 607.1 Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporation adopts the following
If amending name, enter the new name	ne of the corporation:	
a must be distinguishable and court	rin the word "corporatio	n," "company," or "incorporated" or the abb
rp.," "Inc.," or Co.," or the designa d "chartered," "professional associati	ition "Corp," "Inc," or '	'Co". A professional corporation name must co
Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS )		7797 Golf Circle Dr # 204
		Margate, Fl 33063
Enter new mailing address if annlic	ahle•	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7797 Golf Circle Dr # 204
		Margate, FI 33063
	-	
<b>*</b>		
If amending the registered agent and new registered agent and/or the new		ress in Florida, enter the name of the
new registered agent and/or the new		
new registered agent and/or the new  Name of New Registered Agent	registered office address	<u> </u>
new registered agent and/or the new  Name of New Registered Agent	registered office address Flavio Scotton 7797 Golf Circle	e Dr # 204
new registered agent and/or the new  Name of New Registered Agent	registered office address Flavio Scotton 7797 Golf Circle	e Dr # 204

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.

Example: X Change	PT Jo	ohn Doe	
X Remove	<u>v</u> <u>M</u>	fike Jones	
_ <u>X</u> Add	<u>SV</u> Si	ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove	<u> Dić</u>	FLAVIO SCOTTON	7797 Gotf Circle Dr # 204 Margate, Fi 33063
2) Change Add Remove	VP	GASPAR M SOUZA	4344 N Federal Hwy - 3324 Fort Lauderdale, Fl 33301
3 ) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

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MANUAL TABLESTAL TO SEC. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
	<del></del>
reclassification or cancellation of issued shares	
ent if not contained in the amendment itself:	
	e, reclassification, or cancellation of issued shares, tent if not contained in the amendment itself;

The date of each amendment(s) add	option: 6-29-12
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/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for	or the amendment(s) was/were sufficient for approval
by	
	(voting group)
action was not required.	oted by the board of directors without shareholder action and shareholder oted by the incorporators without shareholder action and shareholder
Dated_06/29/2	2012
Signature(By\a dir selected	
	Flavio Scotton
-	(Typed or printed name of person signing)
	Manager Director
_	(Title of person signing)