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Phone : (941)366-1819
Fax Number : (866)582-8258

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COR AMND/RESTATE/CORRECT OR O/D RESIGN PRO ACTION AIR, INC.

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COVER LETTER

'TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION:	PRO ACTION AIR, INC.			
DOCUMENT NUMBER	R:	P11000052080			
The enclosed Articles of	Amendment and fee are s	ubmitted for filing.			
Please return all correspo	ndence concerning this m	atter to the following:			
	\$	STALEY WEIDMAN			
		lame of Contact Person			
	CHECK MATE LICENSING SERVICE				
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	4411 BEE RIDGE RD #257				
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For further information of	oncerning this matter, plea				
	ontact Person	at (941) 366-1819 Area Code & Daytime Telephone Nun	her		
		payable to the Florida Department of State:	.051		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Amenda Division P.O. Bo	Address nent Section of Corporations x 6327 see, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Articles of Amendment to Articles of Incorporation of

	of		
PRO ACTIO	ON AIR, INC), C.	•
(Name of Corporation as currently filed			
P1100	0052080		
(Document Number of Co	orporation (if	known)	
cursuant to the provisions of section 607.1006, Florida mendment(s) to its Articles of Incorporation:	a Statutes, th	is Floridu Profit Corpora	tion adopts the follow
If amending name, enter the new name of the corp	oration:		
he new name must be distinguishable and coniain the w hbreviation "Corp.," "Inc.," or Co.," or the designati ame must contain the word "chartered," "professional c	lon "Corp,"	"Inc," or "Co". A profes	sional corporation
. Enter new principal office address, if applicable:	•		
Principal office address <u>MUST BE A STREET ADDRI</u>	<u>ESS</u>)		
. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	•		
If amending the registered agent and/or registered	office addre	ss in Florida, enter the na	me of the
new registered agent and/or the new registered offi		SO IN PROPERTY CHIEF THE PAR	ane or the
Name of New Registered Agent:			
Name of New Registerett Agent:			•
	<i>((1)</i>		
·	(Florida stree)	(adaress)	
New Registered Office Address:		, Florida	
	(City)		(Zip Code)
w Registered Agent's Signature, if changing Register			
ereby accept the appointment as registered agent. I an	r ea Agenc: n familiar wit	h and accept the obligation	s of the position.
		•	•
Signature of New R	egistered Ag	ent if changing	
Digitalist by North	-5	ന്ന, ഉണ്ടവളവള	***
•			745

Page t of 4

	B. Please indicate the title(s), name and add		
Our database of additional sheet.	can index up to 6 officers/directors. If you	have more th	an 6 officers/directors, please list them on
Title(s)	Name	<u>Adc</u>	iress
1)P	WILKES, WILLIAM T JR.	<u> </u>	3020 SW 27TH COURT CAPE CORAL FL 33914 US
2)		<u> </u>	
3)			
4}			
5)			
6)			
sá nith son miso			
	an officer and/or director, please list the ti		ie of the officer/director to be removed:
Title(s)	Name	Title(s)	<u>Name</u>
f)		4)	
2)		5)	
n		٤١	

endment if not contained in the amendment itself:
•
12/8/2011
12/9/2011
(no more than 90 days after amendment file date)
, and the second
(<u>CHECK ONE</u>)
the shareholders. The number of votes cast for the amendment(s) for approval.
by the shareholders through voting groups. The following statement ofting group entitled to vote separately on the amendment(s):
amendment(s) was/were sufficient for approval
•
(voting group)
(voling group)
the board of directors without shareholder action and shareholder
the incorporators without shareholder action and shareholder
011
president or other officer of directors or officers have not been
incorporator - if in the hands of a receiver, trustee, or other court ciary by that fiduciary)
WILKES, WILLIAM T JR.
(Typed or printed name of person signing)
(13 hear or brance manie or berson signing)
PRESIDENT
PRESIDENT (Title of person signing)