## 2000070046

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cil	ty/State/Zip/Phone	e #)
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(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
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JUN 25 2015 C LEWIS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SKYWARRIOR C	HARTER INC.	
DOCUMENT NUMB			
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	Judith Lightfoot		
•		Name of Contact Person	1
	SKYWARRIOR CHARTER	INC.	
		Firm/ Company	
	4141 JERRY L MAYGARDI	• •	
		Address	
	PENSACOLA, FL 32504		
•	***	City/ State and Zip Cod	e
judi@	skywarriorinc.com		
<del></del>	E-mail address: (to be us	ed for future annual report	notification)
For further information  Judith Lightfoot	concerning this matter, pleas	e call:at (	、898-145 <b>1</b>
Name o	of Contact Person	at ( Area Co	de & Daytime Telephone Number
	the following amount made p		•
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ling Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assec, FL 32301

## Articles of Amendment to Articles of Incorporation of

• • • • • • • •

FILED

- SECRETARY OF STATE
DIVISION OF CORPORATIONS

15 JUN 16 PM 2: 20

SKYWARRIOR CHARTER INC.

(Name of Corporation as	s currently filed with the Florida Dept. of State)
P120000	
(Document)	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006. Florida Statits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ration:
SKYWARRIOR INC.	The new
name must he distinguishable and contain the word "c "Corp.," "Inc.," or Co.," or the designation "Corp," "I word "chartered," "professional association," or the abbr	orporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4211 JERRY L MAYGARDEN RD
	PENSACOLA, FL 32504
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office  Name of New Registered Agent	ffice address in Florida, enter the name of the e address:
(,	Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	
Signatura	of New Pagistavad 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)

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
<u> </u>			
4) Change			
Add			
Remove			
5) Change			
Add	-		
· <u>-</u>			
Remove			
6) Change	<del></del> -		
Add			
Remove			

amending or adding additional Art ttach additional sheets, if necessary).	(Be specific)
	·
an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
<u>provisions for implementing the ame</u>	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

JUNE 10, 2015	P. L. p. U
The date of each amendment(s) adoption:	SECRETAR YILDSiller Alfan the
date this document was signed.	DIVISION OF CORPORATIONS
Effective date if applicable:	15 JUN 16 PM 2: 20
(no more than 90 days after amendment file date)	14 2011 10 111 2· 20
(no mare many agree terrorant grow tame)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the ame by the shareholders was/were sufficient for approval.	ndment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shaction was not required.	areholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	older
JUNE 10, 2015 Dated	
10 / 1	
Signature Sucha Sill	
(By a director, president or other officer – if directors or officers have r	not been
selected, by an incorporator – if in the hands of a receiver, trustee, or o	ther court
appointed fiduciary by that fiduciary)	
GREGORY B. SIGLER	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: SKYWARRIOR CI	HARTER INC.	
	BER: P12000070042	·	
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	Judith Lightfoot		
		Name of Contact Person	l
	SKYWARRIOR CHARTER	INC.	
		Firm/ Company	
	4141 JERRY L MAYGARDI	• •	
		Address	
	PENSACOLA, FL 32504		
		City/ State and Zip Code	2
iudi@	)skywarriorinc.com		
	•	ed for future annual report	notification)
For further informatio	n concerning this matter, pleas	e cali: at (at	898-1451
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p		
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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	endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301