PUCCOLUP

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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	Office Use Or	



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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 25, 2016

GRANT DESMARAIS 100 CESSNA BLVD STE 1 PORT ORANGE, FL 32128

SUBJECT: GAIRCRAFT, INC Ref. Number: P14000001619

We have received your document for GAIRCRAFT, INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Page 4 is missing from the document. Please find enclosed and complete the missing page.

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) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 816A00018148

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GAIRCRAFT, INC					
DOCUMENT NUMB						
		bmitted for filing.				
Please return all corres	pondence concerning this mat	ter to the following:				
	GRANT DESMARAIS					
-	·	Name of Contact Person	1			
	GAIRCRAFT, INC	mr and fee are submitted for filing. Incerning this matter to the following: SMARAIS Name of Contact Person T, INC Firm/ Company A BLVD, SUITE I Address NGE, FL 32128 City/ State and Zip Code AHOO.COM Address: (to be used for future annual report notification) this matter, please call: at (386				
-		Firm/ Company				
	100 CESSNA BLVD, SUITE	I				
-		Address				
	PORT ORANGE, FL 32128					
-		City/ State and Zip Code	e			
GCRO	SANO@YAHOO.COM					
	-	ed for future annual report	notification)			
	· ·	•	,			
For further information	concerning this matter, pleas	e call:				
GRANT DESMARAI	S	at (386	235-5025			
Name o	f Contact Person		de & Daytime Telephone Number			
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State:			
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is	Certificate of Status Certified Copy (Additional Copy			
Ame Divis P.O.	ing Address Indment Section Identification of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	ment Section on of Corporations Building			

Articles of Amendment to Articles of Incorporation of

the law the

GAIRCRAFT, INC

16 SEP -7 AH II: 16

darcoari, ne		A CONTRACTOR OF STATE
(Name	of Corporation as currer	ntly filed with the Florida Dept. of State)
14000001619		[MLLMIMM at
	(Document Number	of Corporation (if known)
	1100¢ TI 11 0	
Articles of Incorporation:	.1006, Florida Statutes, thi	is Florida Profit Corporation adopts the following amendmen
If amending name, enter the new n	ame of the corporation:	
// A .		The new
	nation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
F-4	:6Ubl	N/A
Enter new principal office address. Principal office address MUST BE A.S.		
Enter new mailing address, if appl		N/A
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	
	•	
		dress in Florida, enter the name of the
new registered agent and/or the ne	w registered office addre	<u>ss:</u>
Name of New Registered Agent	N/A	
	(Florida e	treet address)
	•	ireet address)
New Registered Office Address:	N/A	, Florida
		(City) (Zip Code)
·		
	•	
w Registered Agent's Signature, if c		
nereby accept the appointment as regis	tered agent. I am familiar	with and 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)

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 Do	<u>oe</u>		
X Remove	$\underline{\mathbf{v}}$	Mike Jo	ones		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change				_	
Add					
Remove					
2) Change	,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	 -		_	
Add					
Remove					
3) Change		_		_	
Add					
Remove					
4) Change					
Add		_		-	
Remove					
5) · Change					
Add		-		-	
					,
Remove			,		
6) Change		-		. .	
Add					
Remove					

(Atta	nending or adding additional Articles, enter change(s) here: ch additional sheets, if necessary). (Be specific)
	•
	
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F 16	and the second of the second o
prov	amendment provides for an exchange, reclassification, or cancellation of issued shares, isions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
	CORPORATION WAS ORIGINALLY SET UP WITH 100 (ONE HUNDRED) SHARES. THE S CORPORATION
AMENI	THE TOTAL SHARES TO INCREASE TO 1,000 (ONE THOUSAND) SHARES. THE ORIGINAL 100 SHARE
ARE DI	STRIBUTED TO GRANT DESMARAIS. THE BALANCE OF 900 SHARES ARE NOT BEING
DISTRI	BUTED AT THIS TIME. THE 900 SHARES WILL BE HELD IN CORPORATION FOR FUTURE
DISTRI	BUTION.
	·

The date of such amountment	AUGUST 12, 2016	to it into a
date this document was signed	t(s) adoption:	_, if other than th
Effective date if applicable:	AUGUST 12, 2016	
	(no more than 90 days after amendment flie date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this date will he Department of State's records.	not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/weby the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	to approved by the shareholders through voting groups. The following statement ad for each voting group entitled to vote separately on the amendment(s):	•
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voling group)	•
The amendment(s) was/wes action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
AUG Dated	UST 12, 2016	
Signature_	(+D-	
. se	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court epointed fiduciary by that fiduciary)	-
	GRANT DESMARAIS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	 ,

Page 4 of 4

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