P14000002156

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(City/State/Zip/Prione #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Caerross Enary Name)				
(Document Number)				
Certified Copies Certificates of Status				
Consideration to Filling Officers				
Special Instructions to Filing Officer:				

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: FLIGHT SILDOCUMENT NUMBER: P1400000215	MULATOR MIAI 6	MI, INC		
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this mat	tter to the following:			
SAUL SUAREZ				
	Name of Contact Persor	1		
FLIGHT SIMULA	TOR MIAMI, INC			
	Firm/ Company			
310 FONTAINEB	LEAU BLVD AP	PT 503		
	Address			
MIAMI, FL. 33172				
	City/ State and Zip Code	e		
SSUAREZ613@GM/	AIL.COM			
	sed for future annual report	notification)		
For further information concerning this matter, pleas	se call:			
SAUL SUAREZ	_{at (} 786	326-7110		
Name of Contact Person Area Code & Daytime Telephone Numb				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
■ \$35 Filing Fee ■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle		

Articles of Amendment to Articles of Incorporation of

BLUELIGHT HOLDINGS INC

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

P14000002156 FEIN #46-4507443

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

	ion "Corp," "Inc."	ation," "company," or "incorporated" or th or "Co" A professional corporation name m on "P.A."	
Enter new principal office address, if	applicable:	16950 N. BAY ROAD	
rincipal office address <u>MUST BE A STK</u>	REET ADDRESS)	BLDG #2, STE #2501	
		SUNNY ISLES BEACH, FL. 331	160
Enter new mailing address, if applicable:		310 FONTAINEBLEAU BLVI	
(Mailing address MAY BE A POST OF	FFICE BOX)		
(Mailing address <u>MAY BE A POST OF</u>	FFICE BOX)	APT #503	_
		MIAMI, FL. 33172	
	or registered office	MIAMI, FL. 33172	
If amending the registered agent and/ new registered agent and/or the new	or registered office registered office add	MIAMI, FL. 33172	
If amending the registered agent and/new registered agent and/or the new in Name of New Registered Agent	or registered office registered office add	MIAMI, FL. 33172 address in Florida, enter the name of the ress:	

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	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	- 11 - 11 - 11 - 11 - 11 - 11 - 11 - 1		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

waen additional sheets, y heces	nal Articles, enter changel ssary). (Be specific)		
	N/A		
·			,
			+04.4
an amendment provides for provisions for implementing t	an exchange, reclassificat	ion, or cancellation of	issued shares,
(if not applicable, indicate	N/A)	ained in the amendine	nt user.
	N/A		

The date of each amendmen date this document was signed	t(s) adoption: DECEMBER 12, 2014	, if other than the
Effective date if applicable:	DECEMBER 12, 2014	
Effective date in applicable.	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	ere adopted by the shareholders. The number of votes east for the amendment(s) ere sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s east for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
DEC	CEMBER-12/2014	
Signature	The state of the s	
(1)	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	
ان ســب	ppointed fiduciary by that fiduciary)	
/	SAUL SUAREZ	
(_	(Typed or printed name of person signing)	_
	PRESIDENT	
	(Title of person signing)	_