## PILOCOSUATION

(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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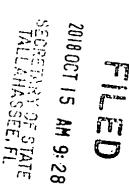


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And

R. WHITE 00T 2.2 2013



## COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: The A	ir Joa Corporation
The enclosed Articles of Amendment and fee are su	abmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
The Air 8293 Son Brooksui	Name of Contact Person  Joa Cor Poration  Firm/ Company  Shine Grove Rad  Address  Ile Fl 34613  City/ State and Zip Code  oal yahoo. Com  sed for future angual report notification)
For further information concerning this matter, pleas	se call:
Scott Jag	at ( <u>352</u> ) <u>284 1832</u> Area Code & Daytime Telephone Number
Find and in the desirable of Mariana and A	
Enclosed is a check for the following amount made j	payable to the Florida Department of State:
S35 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tailahassee, FL 32301

## Articles of Amendment

## Articles of Incorporation

FILED

of Corporation as currently filed with the Florida Dept REState) 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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

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Example: <u>X</u> Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
D _X Change	P Scott Joa	8293 Sunshine Grad
Add Remove		Brooksville FL 34613
2) K Change	V Jessica La Chance	e 8293 Sonshive Grove
Add Remove		Brooksuille Fl 34613
3 ) Change	C Glen E Blair Walt	ers 8293 Sonshine Gro Brooksuille Fl
<b>X</b> , Add		34613
4) Change		
Add Remove		
57 Change		
Add		<del>.</del>
Remove		
6) Change		
Ndd		

ttach <i>additional</i>	dding additional Arti sheets, if necessary).	(Be specific)				
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<u>an amendment</u>	provides for an exch	<u>ange, reclassifi</u>	cation, or cance	ellation of issue-	<u>d s</u> har <u>es.</u>	
<u>rovisions for in</u>	nplementing the ame	<u>ndment if not e</u>	ontained in the	amendment its	<u>elf:</u>	
(if not applic	cable, indicate N/A)		. 1			
			V/A			
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The date of each amendment(s) adoption: October 4, 2018
Effective date if applicable: October 4, 2018 (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated Oct 1, 2018 Signature
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Scott Joa
(Typed or printed name of person signing)
<u> </u>
(Title of person signing)

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