## P15000014001

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## **COVER LETTER**

TO: Amendment Section

**Division of Corporations** NAME OF CORPORATION: \_\_\_\_ Micro Drone Vision, Inc. DOCUMENT NUMBER: P15000014001 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Justin W. Newcomb Name of Contact Person Micro Drone Vision, Inc. Firm/ Company 15000 Citrus Country Drive, Ste. 103 Address Dade City, FL 33523 City/ State and Zip Code justin@microdronevision.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: \_\_\_<sub>)\_</sub>270-8665 Justin W. Newcomb Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$43.75** Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

DIVISIONETA	ALEU BLEU
2015 APR 3	RY OF STATE FOR FOR ATTOM
2815 APR 27	PH 3: 12

Micro Drone Vision, Inc.			'77 3
(Name of Corporation as	s currently filed with the I	Florida Dept. of State)	<del></del>
P15000014001			
(Documen	nt Number of Corporation (	if known)	_
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the follow	ing amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
N/A			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	on," "company," or "incorporated" or the "Co". A professional corporation name mus "P.A."	abbreviation
D E-4	if and inchia.	N/A	
B. Enter new principal office address, (Principal office address MUST BE A S			
			<u> </u>
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A	_
D. If amending the registered agent an new registered agent and/or the ne			<del>-</del>
Name of New Registered Agent	Justin W. Newcomb	<b>)</b>	
Nume of New Registered Agent	20125 Heron Cross	sing Drive	
	(Florida st	reet address)	
New Registered Office Address:	Tampa	, Florida_33647	
New Negasierea Office Agaress.	(City)	) (Zip Code)	_
		with and accept the obligations of the position	ı.

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.

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)	Title	Name	<u>Addres</u> s
1) Change	s	William H. Edwards	20125 Heron Crossing Drive
Add			Tampa, FL 33647
<b>✓</b> Remove			
2) Change	S	Bonita L. Edwards	20125 Heron Crossing Drive
Add			Tampa, FL 33647
Remove			
3) Change	V	Lindsey Helland	20125 Heron Crossing Drive
Add		<del>-</del>	Tampa, FL 33647
Remove			
4) Change			
Add			
Remove			
5) Change		<u></u>	
Add			
Remove			
6) Change			
Add			
Remove			

Employer Ide	ntification Number: 47-3085734
provisions fo	ent provides for an exchange, reclassification, or cancellation of issued shares, implementing the amendment if not contained in the amendment itself: plicable, indicate N/A)
William H. Ed	wards held 29 shares in the company which he forfeited/relinquished
back to Micro	Drone Vision, Inc. These 29 shares were redistribited as follows:
Bonita L. Edv	vards previous shares 51 new shares 13 equals 64 total shares
	waamb province abores 20 new abores 44 arrests 24 total abores
Justin W. Ne	vcomb previous shares 20 new shares 11 equals 31 total shares

The date of each amendment date this document was signed	• •	, if other than
Effective date if applicable:	April 21, 2015	
-	(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
<sub>Dated</sub> Apri	121, 2015	
Signature _	150	_
	ly 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 oppointed fiduciary by that fiduciary)	
	Justin W. Newcomb	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	<del></del>

the