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OHANS OF CORPORATION

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COVER LETTER

Division of Corporations
NAME OF CORPORATION: FLYT 66N6
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Herson
FLY760N6 Firm/ Company
FLY750N6 Firm/Company 100 14 AV 5 S
100 14 AV63
Address
St PETE FL 33701 City/ State and Zip Code
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
DIAWA ATTEBERRY at 727 249-5878 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person / Area Code & Daytime Telephone Number
DIAWA ATTEBERRY at 727 249-5878 Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing Address Amendment Section Street Address Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

KLYTEON.	E INC				
	 	ly filed with the Florid	a Dept. of State)		
P 150	00 79 82-	7			
	<u> </u>	f Corporation (if known)		
Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation:		Florida Profit Corpora	tion adopts the folio	wing amendn	nent(s) t
A. If amending name, enter the new name of the	ie corporation:				
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	Corp," "Inc," or "	'Co". A professional c			on
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)		-			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>: BOX</u>)			77 JUL 22	SECRETION FILE
D. If amending the registered agent and/or reg new registered agent and/or the new register			ne name of the	P# 12	100 ST
- · · · · · · · · · · · · · · · · · · ·		<u>-</u>		:. 2	温
Name of New Registered Agent					22. 200
	(Florida str	reet address)			
New Registered Office Address:	,	•	, Florida		
New Negisterea Office Address.		(City)		Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age			gations of the positio)n .	
	Signature of New R	Pagistared Agent if chan	aina		

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 <math>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: XChange	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) <u>X</u> Change	CEO/P	ALEX ATTOBERMY	
Add			
Remove			
2) Change	VP_	CHRIS HARMON	
Add			
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			

5) Change	<u></u>		
Add			
Remove			
6) Chanca			
6) Change			
Add			
Remove			

(Atta	ch <i>additional</i> .	sheets, if ne	cessary). (
	HERE H	lave 1	366N K	MENDM	<i>BNTS</i>	To	CORPERATE	STRUCTURE
To	BE IN	LINE	WITH	ARTIC	CLES	o 6.	CORPERATION	<u> </u>
	·····					· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
E Ifan	omandmant	nrovidos fo	r an araban	ga raelassifia	ation or so	ncallati	on of issued shares,	
pro	visions for im (if not applied	plementing	the amend	ment if not co	ntained in t	he amei	ndment itself:	
	O CHA		•					
			statif to the second se					
	 							

	, if other than th
Effective date if applicable: (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 dat 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 cast 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):	nt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by DIRECTOR (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	г
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
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)	
(Typed or printed name of person signing)	
CEO/PRES (Title of person signing)	
(Title of person signing)	