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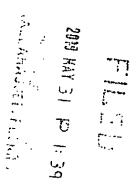
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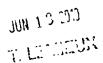
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## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: Aeronyde Corporation DOCUMENT NUMBER: P16000037407 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Edgar Munoz Name of Contact Person Aeronyde Corporation Firm/ Company 3030 Venture Lane, STE, 107 Address Melbourne FL 32934 City/ State and Zip Code edgar.munoz@aeronyde.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (352 ) 397-0689

Area Code & Daytime Telephone Number Edgar Munoz Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □S43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee ■ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

## Articles of Amendment

## Articles of Incorporation

 $\mathbf{of}$ 



Aeronyde Corporation (Name of Corporation as currently filed with the Florida Dept. of State) 1: 39 P16000037407 (Document Number of Corporation (if known) ALLMING EET LINED 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 <u>MUST BE A STREET ADDRESS</u>) 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: \_, Florida\_ 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 Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT J</u>	<u>ohn Doe</u>	
X Remove	Υ Δ	dike Jones	
X Add	<u>sv</u> <u>ş</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	V	Danny Chung	1783 REDWOOD GROVE TER
x Add			LAKE MARY FL 32746
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			-
Remove			
4) Change		<del></del> -	
Add			<del></del>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		<del></del> -	
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
·	
···	
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendment(s	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date Department of State's records.	ite will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment( sufficient for approval.	s)
	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	₽ <b>n</b> i
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
05/24/20 Dated	)19 	
Signature	Bar X-Ulivez-	
(By	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other coubinted fiduciary by that fiduciary)	
	Edgar A. Munoz	
	(Typed or printed name of person signing)	<del></del>
	President	
	(Title of person signing)	