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COVER LETTER

Division of Corporations NAME OF CORPORATION: Air POCKET Shuttle DOCUMENT NUMBER: P1(10000) 73 957 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Shillmara Joseph FORKET Shittle Cort For further information concerning this matter, please call: at (8/3) 713 7594 Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: **□\$43**.75 Filing Fee & □\$52.50 Filing Fee □ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy

enclosed)

Mailing Address

TO: Amendment Section

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 Tallahassee, FL 32301

(Additional Copy is enclosed)

Articles of Amendment

to

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Articles of Incorporation		n
of i		

of	I Chiesa Chana Weet
Air POCKet Shu	HYALA SEP 1 1 (PH/12-107
(Name of Corporation as current	ly filed with the Florida Dept. of State)
Air POCKET ShuHI	E SECRETARY OF ATALEURO 73957
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	i
(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)	PD. BOX 7459
	Weslin Chapil 71 33543
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent 15 hil Mica	Joseph
_/D4/) AFP1 (Florida st	an place
New Registered Office Address: 1445-160	Marel , Florida 335/3 (Ciry) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
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</u>	John Do	<u>c</u>	
X Remove	<u>v</u>	Mike Jos	nes	
X Add	<u>sv</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
l) Change		_		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		.		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

	r adding additional Art nal sheets, if necessary).	(Be specific)			
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<u>f an amendr</u>	nent provides for an exc or implementing the am	hange, reclassific	ation, or cancella	tion of issued shar	es.
(if not a	oplicable, indicate N/A)	enument ii not co	ittained in the air	iendment itsen.	
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NA					
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The date of each amendment(s) adoption:	4/08/2018	, if other than the
date this document was signed.	0/1/2010	
Effective date <u>if applicable</u> :	(no more than 90 days after amendm	ent file date)
Note: If the date inserted in this block does not document's effective date on the Department of	not meet the applicable statutory filing	requirements, this date will not be listed as the
Adoption of Amendment(s) (CH	IECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a		t for the amendment(s)
☐ The amendment(s) was/were approved by th must be separately provided for each voting		
"The number of votes cast for the ame	ndment(s) was/were sufficient for appro	val
by(vo		
(vo	ting group)	
The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder actic	on and shareholder
Dated 09 08 20	B	
Signature		
` •	sident or other officer – if directors or o corporator – if in the hands of a receiver,	
	y by that fiduciary)	trustee, or other court
ANI	DREW C. BEZ (Typed or printed name of person signi	LLE
	(Typed or printed name of person signi	ng)
	MUYL	
	(Title of person signing)	