

(I	Requestor's Name)	
(,	Address)	
	Address)	
((City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	Business Entity Name)	
(1)	Document Number)	
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SECRETARY OF STATE AND A SHANNING AHASSEE FLORID

C GOLDEN
JUN - 4 2018

COVER LETTER

Division of Corporations
NAME OF CORPORATION: BARDELAIR, LUC.
DOCUMENT NUMBER: <u>P16000089904</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person
/ Name of Contact Person
Firm/ Company
1/297 Sw 18 COURT
Address MIRAMAL FL 33025 City/ State and Zip Code
City/ State and Zip Code
BARDELAIRO GMAIL. COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: AOMY
Enclosed is a check for the following amount made payable to the Florida Department of State:
Enclosed is a check for the following amount made payable to the Florida Department of State.
S35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) S43.75 Filing Fee Certified Copy (Additional Copy 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



May 15, 2018

NAOMY DORSAINVIL 11297 SW 18 COURT MIRAMAR, FL 33025

SUBJECT: BARDELAIR INC Ref. Number: P16000089904

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 518A00010117

Articles of Amendment to Articles of Incorporation

FILED

of

2018 IUN I PM 4:44

PARSELAIR INC.	2010 JUN -4	
(Name of Corporation as currently filed with the Florida Dept. of State) PIG0000 89904	SECRETARY TALLAHASSE	OF STATE E.FLORIDA
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the foits Articles of Incorporation:	llowing amendme	nt(s) to
A. If amending name, enter the new name of the corporation:		
	The new	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co" A professional corporation name word "chartered," "professional association," or the abbreviation "P.4."		
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 // ADMY - EM SATIVIL // A 9 7 SW 18 COURT (Florida street address)		
New Registered Office Address: IRAMAR Ftorida (City)	33025 (Zip Code)	
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 pos	ition	
Riony Lorsain l	mon.	
Signature of New Revistered 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: <u>X</u> Change	<u>PT</u> Jo	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
<u>X</u> Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name S	<u>Addres</u> s
1) Change	<u> P</u>	ORIOL DORSANUIL	11297 SW18 CT
Add			Minaium F23303
Remove		, ,	
2) Change	1	NADMY DORSAWVIL	1/297 SW 18 CT
X Add		·	MIRAMAR, FL. SSUS
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			·
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
		. =
f an amendment provides for an exch	ange, reclassification, or cancellation of issu	ed shares,
(if not applicable, indicate N/A)	dment if not contained in the amendment i	tseii:

The date of each amendment(s) adoption: $\frac{5/8/20/8}{}$, if other than the
late this document was signed.
Effective date if applicable: $5/8/208$
(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 as the 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):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by" (voting group)
(voting group)
☐ 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 $5/8/20/8$
Signature Larmy Sorgainvil
(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)
NADMY DORSAINVIL
(Typed or/printed name of person signing)
PRESIDENT
(Title of person signing)