## P17000010418

| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ad                     | ldress)            | <del></del> |
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| (Cit                    | ty/State/Zip/Phone | #)          |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | isiness Entity Nam | ne)         |
| (Do                     | ocument Number)    |             |
| Certified Copies        | _ Certificates     | of Status   |
| Special Instructions to | Filing Officer:    |             |
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## **COVER LETTER**

|  |   | COVER LETTER   |
|--|---|--|
| TO: Amendment Section<br>Division of Corpora |   | BO SERVICES, INC.  bmitted for filing.  tter to the following:   |
| NAME OF CORPORA                              | ATION: BRIGHT JET AEF   | RO SERVICES, INC.  |
|  |   | ? E  |
| DOCUMENT NUMBE                               | :R:   |  |
| The enclosed Articles of                     | Amendment and fee are su  | bmitted for filing.  |
| Please return all correspo                   | ondence concerning this ma  | tter to the following:   |
| C  | ESAR CHAVARRIA  |  |
| _  |   | Name of Contact Person   |
| В  | RIGHT JET AERO SERVI  | CES, INC.  |
| •  |   | Firm/ Company  |
| <u>-</u>                                     | O, BOX 653005   |  |
| N  | 41AMI, FL 33265   | Address  |
| _  |   | City/ State and Zip Code   |
| amaldo                                       | @brightjetaero.com  |  |
|  |   | sed for future annual report notification)   |
| For further information of                   | concerning this matter, pleas   | se call:   |
| CESAR CHAVARRIA                              |   | at (786) 382-7963  |
| Name of                                      | Contact Person  | Area Code & Daytime Telephone Number   |
| Enclosed is a check for t                    | the following amount made   | payable to the Florida Department of State:  |
| S35 Filing Fee                               | S43.75 Filing Fee & Certificate of Status   | S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)     |
| Amen<br>Divisi<br>P.O. E                     | ng Address<br>dment Section<br>on of Corporations<br>Box 6327<br>bassee, FL 32314 | Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 |

## Articles of Amendment to Articles of Incorporation of

| BRIGHT JET AERO SERVICES, INC.  |                               |
|---|-------------------------------|
| (Name of Corporation as currently filed with the Florida Dep  | t. of State)                  |
| P17000010418  | ot. of State)                 |
| (Document Number of Corporation (if known)  | 2                             |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> a its Articles of Incorporation:   | dopts the following amendment |
| 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 "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation "chartered," "professional association," or the abbreviation "P.A." |                               |
| 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 na new registered agent and/or the new registered office address:  | me of the                     |
| Name of New Registered Agent  |                               |
|   |                               |
| (Florida street address)  |                               |
| New Registered Office Address:  | _, Florida                    |
| (City)  | (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 obligation  | us 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</u>    | John Doc   |                 |
|----------------------------------|--------------|--|-----------------|
| X Remove                         | <u>V</u>     | Mike Jones   |                 |
| X Add                            | <u>sv</u>    | Sally Smith  |                 |
| Type of Action<br>(Check One)    | <u>Title</u> | <u>Name</u>  | <u>Addres</u> s |
| 1) Change                        | VD           | JULIETA CHAVARRIA  | P.O. BOX 653005 |
| X Add                            |              |  | MIAMI, FL 33265 |
| Remove                           |              |  |                 |
| 2) Change                        |              |  |                 |
| Add                              |              |  |                 |
| Remove 3) Change                 |              |  |                 |
| Add                              |              |  |                 |
| Remove                           |              |  |                 |
| 4) Change                        |              |  |                 |
| Add                              |              |  |                 |
| Remove                           |              |  |                 |
| 5) Change                        |              |  |                 |
| Add                              |              |  |                 |
| Remove                           |              |  |                 |
| 6) Change                        |              |  |                 |
| Add                              |              |  |                 |
| Remove                           |              |  |                 |
|                                  |              | Page 2 of 4  |                 |
| E. If amending or additional she |              | ional Articles, enter change(s) here:<br>cessary). (Be specific) |                 |

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| F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A) |                                       |
|   |                                       |
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| Page 3 of 4   |                                       |
|   |                                       |
| 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 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 and by the shareholders was/were | dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.  |
|  | pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):  |
| "The number of votes car                                   | st for the amendment(s) was/were sufficient for approval  |
| by   | ,"  |
|  | (voting group)  |
| ☐ The amendment(s) was/were a action was not required.     | dopted by the board of directors without shareholder action and shareholder   |
| ☐ The amendment(s) was/were a action was not required.     | dopted by the incorporators without shareholder action and shareholder  |
| Dated 11/29/20   | 19  |
| Signature  | A A   |
| (By a selec  | director, president of other officer = if directors or officers have not been ted, by an incorporator = if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary) |
|  | CESAR CHAVARRIA   |
|  | (Typed or printed name of person signing)   |
|  | PRESIDENT, DIRECTOR   |
|  | (Title of person signing)   |