

P17000037143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

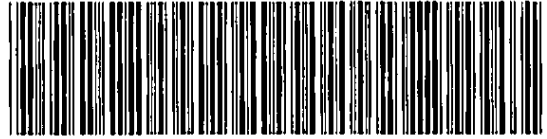
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
2018 JUN 18 PM 3:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Amend

JUN 18 2018

I ALBRITTON

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Soar FLA, Inc.

DOCUMENT NUMBER: P17000037143

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cary Green  
Name of Contact Person  
Soar FLA, Inc.  
Firm/ Company  
5228 River Park Villas Drive  
Address  
St Augustine, FL 32092  
City/ State and Zip Code

carygreen@aviaaero.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cary Green at ( 904 ) 505-5185  
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:

- |                                                     |                                                                        |                                                                                                     |                                                                                                                            |
|-----------------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|-----------------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|

**Mailing Address**  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 11, 2018

CARY GREEN  
SOAR FLA, INC.  
5228 RIVER PARK VILLAS DRIVE  
ST. AUGUSTINE, FL 32092

SUBJECT: SOAR FLA, INC.  
Ref. Number: P17000037143

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

The document must also contain the address of the registered agent which must be at a Florida street address.

You can not attach Articles of Incorporation to an Amendment as the Articles of Incorporation are already on file with our office. The information that you are amending must be included within the amendment.

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.

Irene Albritton  
Regulatory Specialist II

Letter Number: 918A00012068

RECEIVED  
18 JUN 18 PM 12:44  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

Articles of Amendment  
to  
Articles of Incorporation  
of

Soar FLA, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

PI7000037143

(Document Number of Corporation (if known))

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:**

N/A

*The new 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 MUST BE A STREET ADDRESS)

N/A

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

N/A

**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

Rudd Davis

5228 RIVER PARK VILLAS DR

(Florida street address)

New Registered Office Address:

ST. AUGUSTINE

(City)

Florida

32092

(Zip Code)

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2018 JUN 18 PM 3:37  
SECRETARY OF STATE  
TALLAHASSEE, 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:

☒ Change      PT      John Doe

☒ Remove      V      Mike Jones

☒ Add      SV      Sally Smith

| Type of Action<br>(Check One)              | Title    | Name                            | Address                          |
|--------------------------------------------|----------|---------------------------------|----------------------------------|
| 1) <input type="checkbox"/> Change         | <u>P</u> | <u>Cary Green</u>               | <u>5228 River Park Villas Dr</u> |
| <input type="checkbox"/> Add               |          |                                 | <u>St Augustine FL 32092</u>     |
| <input checked="" type="checkbox"/> Remove |          |                                 |                                  |
| 2) <input type="checkbox"/> Change         | <u>D</u> | <u>Avia Aero Services, Inc.</u> | <u>5228 River Park Villas Dr</u> |
| <input type="checkbox"/> Add               |          |                                 | <u>St Augustine FL 32092</u>     |
| <input checked="" type="checkbox"/> Remove |          |                                 |                                  |
| 3) <input type="checkbox"/> Change         | <u>P</u> | <u>Rudd Davis</u>               | <u>333 Kearny St, 7th Floor</u>  |
| <input checked="" type="checkbox"/> Add    |          |                                 | <u>San Francisco CA 94108</u>    |
| <input type="checkbox"/> Remove            |          |                                 |                                  |
| 4) <input type="checkbox"/> Change         | <u>D</u> | <u>Rudd Davis</u>               | <u>333 Kearny St, 7th Floor</u>  |
| <input checked="" type="checkbox"/> Add    |          |                                 | <u>San Francisco CA 94108</u>    |
| <input type="checkbox"/> Remove            |          |                                 |                                  |
| 5) <input type="checkbox"/> Change         |          |                                 |                                  |
| <input type="checkbox"/> Add               |          |                                 |                                  |
| <input type="checkbox"/> Remove            |          |                                 |                                  |
| 6) <input type="checkbox"/> Change         |          |                                 |                                  |
| <input type="checkbox"/> Add               |          |                                 |                                  |
| <input type="checkbox"/> Remove            |          |                                 |                                  |

**E. If amending or adding additional Articles, enter change(s) here:**

(Attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**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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The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: N/A  
(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)

☐ 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.

June 1st 2018  
Dated \_\_\_\_\_

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)

Cary Green

\_\_\_\_\_  
(Typed or printed name of person signing)

President

\_\_\_\_\_  
(Title of person signing)