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COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: DOCTA FLY C	ORP
DOCUMENT NUMBER: P17000090872	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this r	matter to the following:
DENNIS FUNDORA	
FUNDORA & COMPANY	Name of Contact Person
9981 SW 40 STREET	Firm/ Company
MIAMI, FL 33165	Address
	City/ State and Zip Code
DOCTAFLYMIAMI@GMAIL.0 E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	ease call:
DENNIS FUNDORA	at (305) 970-8674
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	le payable to the Florida Department of State:
■ \$35 Filing Fee	
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

Articles of Amendment to Articles of Incorporation of

DOCTA FLY COR	ď	
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(Name of Corporation as curre	ently filed with the Florida Den	ot. of State)
P17000090872		 ,
(Document Numbe	r of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, thats Articles of Incorporation:	nts Florida Profit Corporation a	dopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," oword "chartered," "professional association," or the abbreviatio	r "Co". A professional corpor	
B. Enter new principal office address, if applicable:	835 SW 1ST STREET	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	APT 16	\$ 5% 5
	MIAMI. FL 33130	LAN 4 T
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		22 PLASSEE
D. If amending the registered agent and/or registered office as		me of the
new registered agent and/or the new registered office addr	ess:	
Name of New Registered Agent		
(Florida	street address)	
New Registered Office Address:		. Florida
Men Negastra Office Anaress.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia		is of the position.
Signature of Nev	v 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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) N Change	VP	PAOLA R. PAMELIN	835 SW 1ST STREET
Add			APT 16
Remove			MIAMI, FL 33130
2) X Change	P	RODOLFO E. GASPAR	835 SW 1ST STREET
Add		_	APT 16
Remove			MIAMI, FL 33130
3) Change			
Add			
Remove			
4) Change		···	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

	icles, enter change(s) here: (Be specific)
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	nange, reclassification, or cancellation of issued shares,
f an amendment provides for an exch	inize, reclassification, or cancellation of insuce shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
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provisions for implementing the ame	ndment if not contained in the amendment itself:

The date of each amendment(s) date this document was signed.	06/15/2018 adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this dat Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	ı
	pproved by the shareholders through voting groups. The following statemen or each voting group entitled to vote separately on the amendment(s):	ıı
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(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. 06/15/20 Dated	dopted by the incorporators without shareholder action and shareholder	
selec	director, president or 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)	
	RICARDO N. ZALAZAR	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	