

P18000007075

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

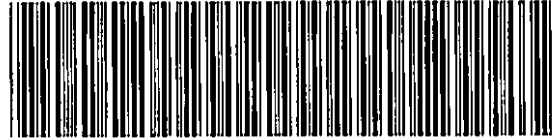
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**FILED**

2018 SEP 27 PM 12:41

SECRETARY OF STATE  
TALLAHASSEE, FL

C. GOLDEN

SEP 27 2018

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Crown Heights Jet Charters, Inc

**DOCUMENT NUMBER:** P18000007075

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

Please return all correspondence concerning this matter to the following:

Roger Moss  
Name of Contact Person

\_\_\_\_\_  
Firm/ Company

7513 W Henry Ave  
Address

Tampa, FL 33615  
City/ State and Zip Code

drmooss2003@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Roger Moss at ( 813 ) 850-4831  
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

September 19, 2018

ROGER MOSS  
7513 W HENRY AVENUE  
TAMPA, FL 33615

SUBJECT: CROWN HEIGHTS JET CHARTERS, INC.  
Ref. Number: P18000007075

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):

You can check only one (1) box regarding the type of action.

The date of adoption of each amendment must be included in the document.

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

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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: 118A00019542

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

2018 SEP 27 PM 12:41

Crown Heights Jet Charters, Inc

SECRETARY OF STATE  
TALLAHASSEE, FL

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

218000007075

(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:**

Sharefleet Logistics Group, Inc

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)

5925 Dr M.L. King Blvd, East  
Tampa, Florida 33619

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

7513 W Henry Ave  
Tampa, FL 33615

**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

(Florida street address)

New Registered Office Address:

(City)

, Florida

(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 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  
(Check One)

Title

Name

Address

- |  |             |                          |                         |
|--|-------------|--------------------------|-------------------------|
| 1) <input type="checkbox"/> Change         | <u>PTSD</u> | <u>Roger Moss</u>        | <u>7513 W Henry Ave</u> |
| <input type="checkbox"/> Add               |             |                          | <u>Tampa, FL 33615</u>  |
| <input checked="" type="checkbox"/> Remove |             |                          |                         |
| 2) <input type="checkbox"/> Change         | <u>P</u>    | <u>Janet Torres Moss</u> | <u>7513 W Henry Ave</u> |
| <input checked="" type="checkbox"/> Add    |             |                          | <u>Tampa, FL 33615</u>  |
| <input type="checkbox"/> Remove            |             |                          |                         |
| 3) <input type="checkbox"/> Change         |             |                          |                         |
| <input type="checkbox"/> Add               |             |                          |                         |
| <input type="checkbox"/> Remove            |             |                          |                         |
| 4) <input type="checkbox"/> Change         |             |                          |                         |
| <input type="checkbox"/> Add               |             |                          |                         |
| <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            |             |                          |                         |

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

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(if not applicable, indicate N/A)

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The date of each amendment(s) adoption: August 31<sup>st</sup> 2018, if other than the date this document was signed.

Effective date if applicable: September 24<sup>th</sup> 2018  
(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.

Dated: September 24<sup>th</sup> 2018

Signature: Janet Torres Moss

(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)

Janet Torres Moss  
(Typed or printed name of person signing)

CEO/President  
(Title of person signing)