P190000 51914

(Re	equestor's Name)	
(Ac	ddress)	
(Ad	ddress)	
(Ci	ity/State/Zip/Phone	#)
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C GOLDEN MAY 2 8 2020

COVER LETTER

TO: Amendment Sec Division of Corp				
NAME OF CORPO	RATION: Cove Air, Inc.			
	BER: P19000051914			
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.		
Please return all corre	spondence concerning this mat	tter to the following:		
	Randall Martin			
		Name of Contact Persor	1	
	Cove Air, Inc.			
		Firm/ Company	——	
	5333 SE Miles Grant Rd. 1201			
		Address		
	Stuart, FL 34997			
		City/ State and Zip Code		
	coveairine@gmail.com			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
Amy Fitzgerald		at (726-0587	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303	

Articles of Amendment Articles of Incorporation of



Cove Air, Inc.

Check if applicable

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

Cove Air, Inc.	2000 1111 - 8 PH 1: 20
(Name of Corporation	as currently filed with the Florida Dept, of State)
719000051914	
	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:
	The new
	poration," "company," or "incorporated" or the abbreviation "Corp" or "Co". A professional corporation name must contain the word ation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	<u>ESS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	tered Agent: Im familiar with and accept the obligations of the position.
Signatu	re 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	John Heckel	233 SE Norfolk Blvd.
Add			Stuart, FL 34997
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			·
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
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f an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
provisions for implementing the amo	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
71:24	
	· · · · · · · · · · · · · · · · · · ·
201,-712	

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•	5/5/2020	
The date of each amendment(s) adop	tion:	, if other than the
date this document was signed.		
5/5/2020)	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(,,	
Note: If the date inserted in this block document's effective date on the Depart	k does not meet the applicable statutory filing requirements, thitment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were adopte by the shareholders was/were suffice	d by the shareholders. The number of votes east for the amendment for approval.	nent(s)
☐ The amendment(s) was/were approx must be separately provided for each	red by the shareholders through voting groups. The following stack to voting group entitled to vote separately on the amendment(s):	ntement
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
5/5/2020		
Dated		
(- h		
Signature	111/a	
	tor, president or other officer – if directors or officers have not b	
	y an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	court
• •		
Ra	ndall B. Martin	
	(Typed or printed name of person signing)	
Pro	esident	

(Title of person signing)