## P19000 067 193

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| (Orty/State/Zip/Filone #)               |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |
|   |
|   |
|   |

Office Use Only



000335125910

16/09 (49--010) (--6:8 \*\*48.75

Philips of Laborated the Policy of States of the States of

amend/ mame change

## COVER LETTER

| Division of Corpo   |   |  |  |               |
|---|---|--|--|---------------|
| NAME OF CORPOR  | DIGNON  | ption Air !<br>067193  | Appliance Repai  | ir, MC        |
| The enclosed Articles of  | of Amendment and fee are su                   | bmitted for filing.  |  |               |
| Please return all corres  | pondence concerning this ma                   | tter to the following:   |  |               |
|   | Michelle                                      | Dinkins  |  |               |
| •   | _   | Name of Contact Person   | n  |               |
|   | Redemption                                    | Heat & Air   |  |               |
|   | 00.   | Firm/ Company  |  |               |
|   | _ 8311_SE 10                                  | oth Terr   |  |               |
|   | Dala, F                                       | Address 34480  |  | <b>±</b>      |
| •   |   | City/ State and Zip Cod  | e  | <b>3</b> 5 5  |
|   | FINDMESTE an E-mail address: (to be us        | ail COM<br>sed for future annual report                            | notification)  | 8 PL 190 C    |
| For further information   | concerning this matter, pleas                 | se call:   |  | <b>19</b> 200 |
| 4.4   | ^   |  |  | F 25          |
| Michael Dinkins at 352, 208-3705  Name of Contact Person Area Code & Daytime Telephone Number |   | - 15   |  |               |
|   |   |  | ·  |               |
| Enclosed is a check for   | the following amount made                     | payable to the Florida Depa  | artment of State:  |               |
| □ \$35 Filing Fee   | \$43.75 Filing Fee &<br>Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |               |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327                      |   |  | Address  |               |
|   |   |  | lment Section  |               |
|   |   |  | on of Corporations<br>Building   |               |
|   | hassee, FL 32314                              |  | Executive Center Circle  |               |

Tallahassee, FL 32301

## Articles of Amendment

to
Articles of Incorporation

| Redemption Air & Appliance Rej   | Miled with the Florida Dept. of State)        |                |                   |
|--|---|----------------|-------------------|
| (Name of Corporation as currently  | filed with the Florida Dept. of State)        | -              |                   |
| <u> </u>   |   |                |                   |
| (Document Number of C  | Corporation (if known)                        |                |                   |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:  | orida Profit Corporation adopts the following | ng amendment(s | s) to             |
| A. If amending name, enter the new name of the corporation:  |   |                |                   |
| Rodemotion Hack & Air, Inc.  |   | The new        |                   |
| name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P. | o". A professional corporation name musi      | abbreviation   |                   |
| B. Enter new principal office address, if applicable:  | 8311 SE 16th Terr                             |                |                   |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )  | Ocala, Fr 34480                               | <b>1</b>       | Ţ.                |
|  |   |                | Ę                 |
| C. F-4   | · · · · · · · · · · · · · · · · · · ·         | <u></u>        | 통<br>일말           |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  |   | <u> </u>       | ر<br>ا            |
|  |   |                |                   |
|  |   |                |                   |
|  | · · · · · · · · · · · · · · · · · · ·         | <u> </u>       | 51 11 1<br>1<br>4 |
| D. If amending the registered agent and/or registered office address   | s in Florida, enter the name of the           |                |                   |
| new registered agent and/or the new registered office address:   |   |                |                   |
| Name of New Registered Agent / / / /   |   | _              |                   |
|  |   | _              |                   |
| (Florida street  | t address)                                    |                |                   |
| New Registered Office Address:   | , Florida                                     | Code)          |                   |
|  | (4.4)   |                |                   |
|  |   |                |                   |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit   | th and accept the obligations of the position |                |                   |
| т поголу иссерт те арронители из техничей акени. Т ит јатиш ми   | a una accept the obligations of the position. |                |                   |
|  |   |                |                   |
| Company CM D   | determed to one of the or                     | _              |                   |
| Signature of New Keg   | gistered 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> <u>J</u> | John Doe       |  |
|--|--------------------|----------------|--|
| X Remove   | <u>v</u> <u>!</u>  | Mike Jones     |  |
| X Add  | <u>sv</u>          | Sally Smith    |  |
| Type of Action (Check One)  1) Change Add Remove | VP                 | Dustin L Wyman | Address 56 Pecan Oberse Circle Ocala, F1 34472 |
| 2) Change Add Remove                             |                    |                |  |
| 3 ) Change Add Remove                            |                    |                |  |
| 4) Change Add Remove                             |                    |                |  |
| 5) Change Add                                    |                    |                |  |
| Remove 6) Change Add                             |                    | <u> </u>       |  |
| Remove   |                    |                |  |

|                     | ets, if necessary). (B |                      |                                       |                                       |  |
|---------------------|------------------------|----------------------|---------------------------------------|---------------------------------------|--|
|                     |                        | <del></del>          |                                       |                                       |  |
|                     |                        |                      |                                       | · · · · · · · · · · · · · · · · · · · |  |
|                     |                        |                      |                                       |                                       |  |
|                     |                        |                      |                                       |                                       |  |
| 17                  |                        |                      |                                       |                                       |  |
|                     |                        |                      | · · · · · · · · · · · · · · · · · · · |                                       |  |
| Til,                |                        |                      |                                       |                                       |  |
|                     |                        |                      |                                       |                                       |  |
| ·                   |                        |                      |                                       |                                       |  |
|                     |                        |                      |                                       |                                       |  |
|                     |                        |                      |                                       |                                       |  |
|                     |                        |                      |                                       |                                       |  |
|                     |                        |                      |                                       |                                       |  |
|                     |                        |                      |                                       |                                       |  |
|                     |                        |                      |                                       |                                       |  |
|                     |                        |                      |                                       | -                                     |  |
|                     |                        |                      |                                       |                                       |  |
|                     |                        |                      |                                       |                                       |  |
| an amendment nro    | vides for an exchang   | e reclassification : | or cancellation of is                 | sued shares                           |  |
| rovisions for imple | menting the amendm     | ent if not container | d in the amendment                    | t itself:                             |  |
| (if not applicable  | , indicate N/A)        |                      |                                       |                                       |  |
| 1.7                 | <del></del>            |                      |                                       |                                       |  |
|                     |                        |                      |                                       |                                       |  |
| 711/                | W                      |                      | <del>.</del>                          | <del></del>                           |  |
| ı Ç                 |                        |                      |                                       | , <u>,</u>                            |  |
| <u> </u>            |                        |                      |                                       |                                       |  |
| · ·                 |                        |                      |                                       |                                       |  |
|                     |                        |                      |                                       |                                       |  |
|                     |                        |                      |                                       |                                       |  |

| The date of each amendment(s) adoption: $\frac{10 2 20 9}{\text{date this document was signed.}}$ Effective date if applicable: $\frac{10 2 20 9}{10 2 20 9}$  | , if other than the      |
|--|--------------------------|
| date this document was signed.   | ,                        |
| Effective date if applicable:  |                          |
| (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 with document's effective date on the Department of State's records.                        | ill not be listed as the |
| 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 ."  |                          |
| 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  |                          |
| Signature Michael & Marking  |                          |
| (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)   |                          |
| Michelle K. Dinking  |                          |
| (Typed or printed name of person signing)  |                          |
| President  |                          |
| (Title of person signing)  |                          |