P190000 72341

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

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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Flight Case To	ouring, Inc.
DOCUMENT NUMBER: P19000072341	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this r	matter to the following:
Guy D. Sperduto	
	Name of Contact Person
Guy D. Sperduto CPA PA	
	Firm/ Company
8963 Stirling Road, Suite 1	101
	Address
Cooper City, Florida 3332	8
	City/ State and Zip Code
gsperduto@accountinglinkusa.co	om
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	ease call:
Guy D. Sperduto	at (P54) 432-0272 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	de 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

Flight Case Touring, Inc.	
(Name of Corporation as cur	rently filed with the Florida Dept. of State)
P19000072341	·
(Document Num	ber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporatio	on:
Rock Jet, Inc.	T1
name must be distinguishable and contain the word "corpo" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," word "chartered," "professional association," or the abbrevia.	The new pration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the tion "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) D. If amending the registered agent and/or registered office	n/a N/a N/a N/a N/a N/a N/a N/a
new registered agent and/or the new registered office ad	dress:
Name of New Registered Agent	
,	ida street address)
New Registered Office Address: h/u	(City) , Florida (Zip Code)
	(ZIP Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	iliar with and accept the obligations of the position.
Signature of 1	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: X Change	<u>PT</u>	John Doe				
X Remove	<u>v</u>	Mike Jone	<u>es</u>			
X Add	<u>sv</u>	Sally Smi	<u>th</u>			
Type of Action (Check One)	<u>Title</u>	<u> 1</u>	<u>Name</u>			Address
1) Change			n/a 			
Add					_	
Remove					_	
2) Change						_
Add				ì	_	
Remove					_	
3) Change					_	
Add					_	
Remove					_	
4) Change					_	
Add				1	_	
Remove					_	
5) Change					_	
Add					_	
Remove					_	
6) Change						
Add		-			-	
Remove					_	

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
n/a	
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an excha provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
'a	

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the De	block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes east for the amendments ufficient for approval.	(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statem reach voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
	5/2019	
Dated	DocuSigned by:	
Signature	Patrick Harris	
(By a d selecte	irector, president of other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
	Patrick Harris	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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