

P200000 24366

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

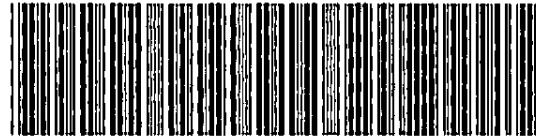
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2020 JUN 22 AM 11:09

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JUN 23 2020

S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2020 JUL 22 PM 2:47

June 12, 2020

ANGELICA TORRES  
RELIANCE JETS CORP  
4704 SW 160TH AVENUE #236  
MIRAMAR, FL 33027

SUBJECT: RELIANCE JETS CORP  
Ref. Number: P20000024366

We have received your document for RELIANCE JETS CORP and check(s) totaling \$30.00. However, the document has not been filed and is being returned for the following reason(s):

There is a balance due of \$13.75. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a LLC, but your entity is a CORPORATION. Please complete and return the enclosed blank form(s).

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.

Shelia H Young  
Regulatory Specialist II

Letter Number: 420A00011683

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Reliance Jets Corp

DOCUMENT NUMBER: P20000024366

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

Please return all correspondence concerning this matter to the following:

Angelica Torres  
Name of Contact Person  
Reliance Jets Corp  
Firm/ Company  
4704 SW 160<sup>th</sup> Ave Apt 236  
Address  
Miramar, FL 33027  
City/ State and Zip Code  
angie1886@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angelica Torres at (786) 7248166  
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 type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|--|---|--|--|

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

Reliance Jets Corp

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

P20000024366

(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:

*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)

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 address in Florida, enter the name of the new registered agent and/or the new registered office address:


Name of New Registered Agent David Torres-Moncada

4704 SW 160th Ave #236  
(Florida street address)

New Registered Office Address: Miami Florida 33027  
(City) (Zip Code)

Now 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

Check if applicable

This amendment(s) is/are being filed pursuant to s. 607.0120 (11)(c), F.S.

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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>P</u>	<u>David Torres</u>	<u>4704 SW 160<sup>th</sup> ave #236</u>
<input type="checkbox"/> Add			<u>Miramar, FL 33027</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>P</u>	<u>David Torres-Moncada</u>	<u>4704 SW 160<sup>th</sup> ave #236</u>
<input checked="" type="checkbox"/> Add			<u>Miramar, FL 33027</u>
<input type="checkbox"/> Remove			
1) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			



The date of each amendment(s) adoption: \_\_\_\_\_, 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 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 incorporators, or board of directors without shareholder action and shareholder action was not required.

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)*

Dated June 18<sup>th</sup> 2020

Signature Angelica Torres  
(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)

Angelica Torres  
(Typed or printed name of person signing)

VP  
(Title of person signing)