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SECRETANT OF STATE

A. Butler

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Jacobs Flight Service Miami, inc
DOCUMENT NUMBER:	P 200000 40 8 61
The enclosed Articles of Amendment and for	ee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
<u></u>	Name of Contact Person Sacobs Flight Service Mianilian Firm/Company
	Name of Contact Person
	Dacobs Flight Service Mianifino
	Firm/ Company
<u> </u>	SW 142 Nd pl miari
	. 1441 (5),
	M'am, PL 3317S City/ State and Zip Code
	City/ State and Zip Code
U M	roce Illariu. edu
	to be used for future annual report notification)
For further information concerning this matter	
Ruben Morei	ar, 30S , 338-6817
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amoun	t made 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to

Articles of Incorporation

FILED

of the fee to
Sacobs Flight Services Min 25 PM 12:45
(Name of Corporation as currently filed with the Florida Dept. of State)
D 2000009 G & SECRETAR COESTATE
P 200000 SECRETARY OF STATE (Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) tits Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
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
(Florida street address)
New Registered Office Address:, Florida
(City) (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
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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> Johr	<u>1 Doc</u>	
X Remove		e Jones	
<u>X</u> Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>938</u>	Aviation, Kingdom w	inc you so insud p
Add			Miani, CL 33175
Remove	_	•	
2) Change	<u>P</u> _	Aldrich Morel	19 ENERI WZ 11PF
Add			Miam., CL 33175
Remove Change	P	Ruben Morel	
✓ Add			4911 Sw JUDNU PL
Remove			Miani, PL 33175
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	mal sheets, if necessary),	(Be specific)			
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<u>lf an amendme</u>	ent provides for an exch	ange, reclassificatio	n, or cancellation	of issued shares,	
provisions for	<u>r implementing t</u> he amer	<u>ndment if not contai</u>	ned in the amend	nent itself:	
(i) not app	plicable, indicate N/A)				
				<u>.</u>	
					
					

.

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file o	lute)
Note: If the date inserted in this I document's effective date on the D	block does not meet the applicable statutory filing requirer epartment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were ad- by the shareholders was/were si	opted by the shareholders. The number of votes cast for the afficient for approval.	amendment(s)
☐ The amendment(s) was/were appoints the separately provided for	proved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amend	owing statement ment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated		
Signature		
selecte	irector, president or other officer – if directors or officers had, by an incorporator – if in the hands of a receiver, trustee, ted fiduciary by that fiduciary)	ve not been or other court
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	president	
	(Title of person signing)	

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