P21000038153

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JUL 23 I ALBRIT, UN

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ISLAND JET CO.				
DOCUMENT NUMI			-		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	atter to the following:			
	MELANIE RESSOPOULOS	3			
	Name of Contact Person				
	ISLAND JET CO.				
	Firm/ Company				
	900 AIRPORT ROAD				
	Address				
	MERRITT ISLAND, FL 32952				
	City/ State and Zip Code				
	FAKHRI@2FLYGROUP.COM				
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
MELANIE RESSOPO	OULOS	at (<u>321</u>	⁴⁵³ -2222		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & 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)		
Ame Divis P.O.	ing Address indment Section ition of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303		

Articles of Amendment to Articles of Incorporation of

ISLAND JET CO.			
	of Corporation as current	tly filed with the Florida Dep	ot. of State)
P21000038153			
	(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	: Florida Profit Corporation a	adopts the following amendment(s) t
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Chartered," "professional association,"	Corp." "Inc," or "Co".	A professional corporation .	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		N/A	
			<u>ئ</u> ے
C. Enter new mailing address, if appl	icable:		22
(Mailing address MAY BE A POST		N/A	
			<u>ب</u> ب
D. If amending the registered agent ar	nd/or registered office add	dress in Florida, enter the na	me of the
new registered agent and/or the ne-	w registered office addres	<u>s:</u>	
Name of New Registered Agent	MELANIE RESSOPOUL	LOS	
	900 AIRPORT ROAD	-	
	(Florida st	reet oddress)	
New Registered Office Address:	MERRITT ISLAND		. Florida 32952
iven regimera office marcia.		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent	<u>t:</u> with and assume the obligation	un of the position
Thereny accept the appointment as regist	erea ageni. Tum jamiliar	wan ana accept the obligation	ns of the position.
() Od-		
	Signature of New F	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)

Example:

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 Doc	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	ADAM BRUMBAUGH	900 AIRPORT ROAD
Add			MERRITT ISLAND, FL 32952
2) Change	CFO	MELANIE RESSOPOULOS	900 AIRPORT ROAD
X Add			MERRITT ISLAND, FL 32952
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			 -
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. <u>11 amei</u> (Attach	iding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
A)N	
	
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lf an ar	nendment provides for an exchange, reclassification, or cancellation of issued shares,
provis (if	ions for implementing the amendment if not contained in the amendment itself: not applicable, indicate N/A)
/A	
	

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file de	ite)
Note: If the date inserted in this blo- document's effective date on the Depa	ck does not meet the applicable statutory filing requirem artment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without shar	eholder action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the a cient for approval.	amendment(s)
☐ The amendment(s) was/were appromust be separately provided for ea	ved by the shareholders through voting groups. The follow wh voting group entitled to vote separately on the amenda	wing statement nent(s):
"The number of votes cast fo	the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
Dated	110/2021	
selected, b	ctor, president or other officer – if directors or officers have by an incorporator – if in the hands of a receiver, trustee, of fiduciary by that fiduciary)	ve not been or other court
	Melanie Ressopoulos (Typed or printed name of person signing)	-
	(Title of person signing)	