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| Special Instructions to | Filing Officer: | |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: FLY'S TIE, INC | | - 11 2 111 |
|--------------------------|---|--|--|
| DOCUMENT NUMB | ER: P94000068001 | | Language of the Control of the Contr |
| | of Amendment and fee are su | bmitted for filing. | |
| Please return all corres | pondence concerning this ma | tter to the following: | |
|] | MICHAEL TIERNAN | | |
| - | | Name of Contact Person | 1 |
| | FLY'S TIE, INC | | |
| - | · | Firm/ Company | |
| | 177 E SAILFISH DR | Time Company | |
| - | | Address | |
| | ATLANTIC BEACH, FL 32: | 233 | |
| - | | City/ State and Zip Code | e |
| | Fedrick and | | |
| | E-mail address: (to be us | 7 @ OUI. Com | notification) |
| | E-man address. (to be us | sea for fatare annual report | normeanon) |
| For further information | concerning this matter, pleas | se call: | |
| MICHAEL TIERNAN | | 904 | 613-4021 |
| | | at (| de & Daytime Telephone Number |
| Name o | f Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for | the following amount made | 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 ndment Section sion of Corporations Box 6327 hassee, FL 32314 | Amend Divisio Clifton | Address Iment Section on of Corporations Building Executive Center Circle |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2017 JUL 27 PH 12: 02 FLY'S TIE, INC. (Name of Corporation as currently filed with the Florida Dept. of State) TALLAHASSEE, FLORIDA P94000068001 (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: 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: (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

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 | PT | John Doe | |
|----------------------------|--------------|---------------|--------------------------|
| X Remove | <u>V</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change | <u>V</u> | RALPH TIERNAN | 177 E SAILFISH DR |
| X Add | | | ATLANTIC BEACH, FL 32233 |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | _ | |
| Add | | | |
| Remove | | | |
| | | | |
| 6) Change | | _ | |
| Add | | | |
| Remove | | | |

| If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | on, or cancellation of issued shares, incd in the amendment itself: | (Attach additional sheets, if necessary). | cles, enter change(s) h (Be specific) | | | |
|--|--|---|--|-----------------------|--------------|-----------------|
| provisions for implementing the amendment if not contained in the amendment itself: | on, or cancellation of issued shares, incd in the amendment itself: | | | | | |
| provisions for implementing the amendment if not contained in the amendment itself: | on, or cancellation of issued shares, ined in the amendment itself: | | | | | |
| provisions for implementing the amendment if not contained in the amendment itself: | on, or cancellation of issued shares, ined in the amendment itself: | | | | | |
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| provisions for implementing the amendment if not contained in the amendment itself: | on, or cancellation of issued shares, incd in the amendment itself: | | | <u></u> | | · |
| provisions for implementing the amendment if not contained in the amendment itself: | on, or cancellation of issued shares, ined in the amendment itself: | | | | | |
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| provisions for implementing the amendment if not contained in the amendment itself: | on, or cancellation of issued shares, incd in the amendment itself: | | | | | |
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| provisions for implementing the amendment if not contained in the amendment itself: | on, or cancellation of issued shares, incd in the amendment itself: | | | | | |
| (if not applicable, indicate N/A) | ined in the amendment itself: | f an amendment provides for an exch | ange, reclassification, | or cancellation of is | sued shares, | |
| | | (if not applicable, indicate N/A) | nament it not containe | ea in the amenamen | t itseii: | |
| | | (g mar approximate) | | | | |
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| The date of each amendment(s) adoption: | , if other than th |
|--|--------------------------|
| · | |
| 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 document's effective date on the Department of State's records. | will not be listed as th |
| 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" (voting group) | |
| (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 O7 22/17 | |
| Signature X Michael & Mich | |
| (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) | |
| \mathcal{M} | |
| (Typed or printed name of person signing) | SIDENT |
| 1 yped or printed name of person signing) | |
| X 1 KESI DENT | |

(Title of person signing)