

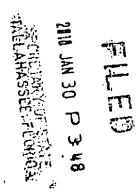
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: London Helicopte	rs, Inc.	
	BER: P95000043876		
	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	David S. Ged, Esquire		
	<del></del>	Name of Contact Person	1
	David S. Ged, P.A.		
		Firm/ Company	
	101 Aviation Drive North		
		Address	
	Naples, Fl. 34104		
		City/ State and Zip Code	e
dgede	@ged-law.com		
<del></del>	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
David S. Ged .		at ( 239	) 514,5048 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	irtment of State:
□ \$35 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 Divi P.O	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle USSEE, FL 32301

## Articles of Amendment \* to Articles of Incorporation of

LONDON HELICOPTERS, INC.

LONDON HELICOPTERS, INC.				
(Name o	of Corporation as current	ly filed with the Florida Dept. of State)		
P95000043876				
	(Document Number o	of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new na	ime of the corporation:			
	ation "Corp." "Inc." or	The new on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."		
B. Enter new principal office address,	if applicable:	150 Aviation Drive South		
(Principal office address MUST BE A S		Naples, FL 34104		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		150 Aviation Drive South		
		Naples, Ft. 34104		
D. If amending the registered agent an new registered agent and/or the new				
new registered agent and/or the nev	David S. Ged. P.A.	<u>u</u>		
Name of New Registered Agent	David S. Ged. P.A.			
	101 Aviation Drive North			
	(Florida sti	reet address)		
New Registered Office Address:	Naples	Florida 34104		
		(City) (Zip Code)		
New Registered Agent's Signature, if el I hereby accept the appointment as registe	ered agent. I am familiar	with and accept the obligations of the position.  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 Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s		
1) Change	P/S	Mark K. Lon	ıdon	150 Aviation Drive South		
A Add				Naples, FL 34104		
Remove						
2) Change						
Add						
Remove						
3 ) Change	<del>-</del>	_				
Add						
Remove				<del>-</del>		
4) Change			*···			
Add						
Remove				<del></del>		
5) Change						
Add						
Remove						
6) Change		_	_			
Add						
Remove						

	). (Be specific)			
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an amandment provides for	change, reclassific	ation, or cancellati	on of issued shares.	
an amenoment provides for an ex	<u>nendment if not co</u>	ntained in the ame	ndment itself:	
provisions for implementing the an				
provisions for implementing the an (if not applicable, indicate N/A)				
provisions for implementing the an				
provisions for implementing the an			••••	
provisions for implementing the an				
provisions for implementing the an				
provisions for implementing the an				
provisions for implementing the an				
an amendment provides for an exprovisions for implementing the an (if not applicable, indicate N/A)				
provisions for implementing the an				

The date of each amendment date this document was signed		, if other than the
Effective date <u>if applicable</u> :	01/25/2018	
Enective date <u>it applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this di- he Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/weby the shareholders was/weby	re adopted by the shareholders. The number of votes cast for the amendment(ere sufficient for approval.	s)
	re approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(vining group)	
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
DatedSignature	/2018	
(B	y a director president or other officer - if directors or officers have not been	<del></del>
	elected, by an incorporator – if in the hands of a receiver, trustee, or other couppointed fiduciary by that fiduciary)	rt
	Mark K. London	
	(Typed or printed name of person signing)	<del></del> _
	Former Director/President/Secretary	
	(Title of person signing)	<del></del>

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