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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ABOVE AIR, INC	<u>.</u>		
DOCUMENT NUMI	BER: P95000052030			
The enclosed Articles	of Amendment and fee are su	abmitted for filing.		
Please return all corre	spondence concerning this ma	itter to the following:		
	Bryan Pollak			
		Name of Contact Perso	מס	
	Above Air, Inc.			
		Firm/ Company		
	1490 SW 1 Way			
		Address		
	Deerfield Beach, FL 33441			
		City/ State and Zip Coo	le	
bryan	@aboveairinc.net			
		sed for future annual repor	t notification)	
	is-mail address. (to be a	sea for future annual repor	i Milleation)	
For further informatio	n concerning this matter, pleas	se call:		
Bryan Pollak		at (336-5252	
Name	of Contact Person	Area Co	ode & Daytime Telephone Number	
Enclosed is a check for	r the following amount made	payable to the Florida Dep	artment 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)	
<u>M</u> ai	iling Address	Street	Address	
	endment Section		dment Section	
	ision of Corporations	Division of Corporations		
P.O. Box 6327 Clifton Building			E	
Tallahassee, FL 32314 2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment

FILED

Articles of Incorporation of

17 SEP 20 AM 10: 40

C帮情報 (16) 36所更 ABOVE AIR, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P95000052030 (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: **BRYAN POLLAK** Name of New Registered Agent eerfield Dearn 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 <math>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 Doc	
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	PSTD	BRYAN POLLAK	1490 SW 1ST WAY
X Add			DEERFIELD BEACH, FL 33141
Remove			
2) Change			
Add			<u> </u>
Remove			
3) Change			-
Add			
Remove			
4) Change			
Add			<u> </u>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ach additional she	eets, if necessary).	(Be specific)			
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ın amendment pr	rovides for an excha	inge, reclassificat	ion, or cancellat	ion of issued share	PS.
ovisions for impl	lementing the amend	dment if not cont	ained in the ame	ndment itself:	
(if not applicable	le, indicate N/A)				
· · · · · · · · · · · · · · · · · · ·					
			======================================		
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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 a document's effective date on the Department of State's records.	not be listed as the
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)	
☐ 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 9-6-2017	
Signature	
(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)	_
CHRIS MARINO	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)