P96000031927

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TO: Amendment Section - 59

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: ____ Mills Air, Inc. DOCUMENT NUMBER: P96000031927 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Leon Mills Name of Contact Person Mills Air, Inc. Firm/ Company 6502 Forest City Road Address Orlando, FL 32810 City/ State and Zip Code Imills@millsair.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: _at (407) 277-1159 Area Code & Daytime Telephone Number Leon Mills Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Mills Air, Inc.					
(<u>Name o</u>	f Corporation as currently	filed with the Florida De	pt. of State)		
P96000031927					
	(Document Number of	Corporation (if known)	•		
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation :	adopts the following a	ımendmen	t(s) to
A. If amending name, enter the new na	me of the corporation:				
N/A			7	The new	
name must be distinguishable and contain " "Inc.," or Co.," or the designation "Co" "chartered," "professional association,"	orp," "Inc," or "Co". A	mpany," or "incorporated professional corporation	" or the abbreviation	"Corp., "	1
B. Enter new principal office address, i	f applicable:	N/A	· ,	등 .	•
(Principal office address MUST BE A ST			-		
		· · · · · · -		<u> </u>	
				<u></u>	ž*
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		N/A	:	09	
D. If amending the registered agent and		ss in Florida, enter the na	ime of the		
new registered agent and/or the new	N/A				
Name of New Registered Agent	N/A				
			<u> </u>		
	(Florida stree	ri address)			
New Registered Office Address:	N/A 		Florida		
	(t	Tity)	(Zip Coo	le)	
New Registered Agent's Signature, if ch I hereby accept the appointment as registe		th and accept the obligatio	ons of the position.		
	Signature of New Reg	istered 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 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	V	Jeffery Mills	6502 Forest City Road
X Add			Orlando, FL 32810
Remove			
2) Change		N/A 	
Add			
Remove 3) Change		N/A	
Add			
Remove			
4) Change		N/A 	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
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) N/H	(Attach additional sheets, if necessary)	i. (Be specific)
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	Ά	
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	provisions for implementing the am	nendment if not contained in the amendment itself:
N/A	(if not applicable, indicate N/A)	
	11/1	
	AV / PT	
· · · · · · · · · · · · · · · · · · ·		

	08/11/2020
The date of each amendment(s) a date this document was signed.	doption:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this I document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
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 shareholder 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 amendment(s) ufficient for approval.
- · · · · · · · · · · · · · · · · · · ·	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes east	for the amendment(s) was/were sufficient for approval
by	."
	(voting group)
DatedSignature(By a d	irector, president or other officer – if directors or officers have not been
selecte	d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	Leon Mills
	(Typed or printed name of person signing)
	President
	(Title of person signing)