P960000018398

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Eagle Jet. Inc. DOCUMENT NUMBER: P96000078398 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Stephane Hoinville Name of Contact Person Eagle Jet, Inc. Firm/ Company 3600 Red Road, Unit 305-A Address Miramar Florida 33025 City/ State and Zip Code eaglejetinc@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954) 438 0090

Area Code & Daytime Telephone Number Stephane Hoinville 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
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Eagle Jet, Inc.				
(Name)	of Corporation as curren	tiv filed with the Florida	Dept. of State)	
P96000078398				
· · · · · · · · · · · · · · · · · · ·	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporatio	on adopts the following amendmen	it(s) to
A. If amending name, enter the new na	ame of the corporation:			
N/A			The new	
name must be distinguishable and con "Corp" "Inc.," or Co.," or the design word "chartered." "professional associa	nation "Corp." "Inc." or	"Co". A professional con	orporated" or the abbreviation	
B. Enter new principal office address,	if applicables	N/A		
(Principal office address MUST BE A S		· · · · · · · · · · · · · · · · · · ·	2	
•				ij
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A		
				
			6	
D. If amending the registered agent an new registered agent and/or the new			name of the	
	N/A			
Name of New Registered Agent			<u> </u>	
		street address)		
New Registered Office Address:	N/A 		, Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			itions of the position.	
	Signature of New	Registered Agent, if chang	ing	

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.

X Change	<u>PT</u> <u></u>	lohn Doe	
X Remove	<u>v</u> :	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	Richard Gabor	3600 Red Road
Add			Unit 305-A
X Remove			Miramar FL 33025
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	•		
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amending or adding additional Arti</u> (Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
N/A	
•	
····	
· .	
E. If an amandment avarides for an arch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A) Stephane Hoinville holds 100% of shares	
Stephane Holling Holds 10070 of Shares	

	November 13, 2017	
The date of each amendment(date this document was signed.	s) adoption:	if other than the
•	November 13, 2017	
Effective date if applicable:		
	(no more than 90) days after amendment file date)	
	nis block does not meet the applicable statutory filing requirements, this date to Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Noven Dated	aber 16, 2017	
Signature		
(By	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Stephane Hoinville	
	(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
	President	
	(Title of person signing)	