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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: Andy Aviation, Inc	ť.	
DOCUMENT NU	JMBER: P97-000024700		
	tles of Amendment and fee are su	ibmitted for tiling.	
Please return all co	orrespondence concerning this ma	tter to the following:	
	Thomas G. Pyc		
	-	Name of Contact Person	1
	Pye Law Firm, PA		
		Firm/ Company	
	3909 W Newberry Road, Sui	te C	
		Address	
	Gainesville, Florida 32607		
		City/ State and Zip Cod	e
to	em@pyelaw.com		,
_		sed for future annual report	notification)
For further inform	ation concerning this matter, plea	se call:	
Thomas Pye		352	381-9799
Name of Contact Person		at ( 352 ) 381-9799 Area Code & Daytime Telephone Number	
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	urtment of State:
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clittor	Address Iment Section on of Corporations i Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

ndy Aviation, Inc		
(Name of Corporation as current	ly filed with the F	Florida Dept. of State)
P7-(I)(X)24700		
(Document Number o	of Corporation (if k	known)
ersuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Co.	orporation adopts the following amendment(s) to
If amending name, enter the new name of the corporation:		
/A		The new
me must be distinguishable and contain the word "corporatio Torp.," "Inc.," or Co.," or the designation "Corp," "Inc," or to ord "chartered," "professional association," or the abbreviation	"Co". A professio	or "incorporated" or the abbreviation
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDRESS</u> )		
	-	
Enter new mailing address, if applicable:		1 AU TI
(Mailing address MAY BE A POST OFFICE BOX)		
		至 型
		72
If amending the registered agent and/or registered office add		nter the name of the
new registered agent and/or the new registered office address	<u>s:</u>	
Name of New Registered Agent N/A		
(Florida str	reet address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
w Registered Agent's Signature, if changing Registered Agent ereby accept the appointment as registered agent. I am familiar	: with and account the	ny ahliautians of the position
легу аксерь не арролитет ах гезімегей адені. Тат затиші	жин ана ассеји <i>т</i> и	и омізанть ој те ромион.

Page 1 of 4

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	<u> PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
I) Change	V	Elize Wall	18917 60th Place A
X Add			Live Oak, Florida 32060
Remove			
2) X Change	PD	Dan T Barnes, Jr	18917 60th Place A
Add			Live Oak, Florida 32060
Remove			
3 ) Change			
Add			
Remove			<del></del>
4) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

If amending or adding additional Articles, enter change(s) here:	
Attach additional sheets, if necessary). (Be specific)	
1	
<del></del>	
	<del></del>
	· · · · · · · · · · · · · · · · · · ·
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)	
	<u> </u>

	July 28, 2017	
he date of each amendment(s) add	pption;	if other than th
ate this document was signed.		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this bloocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this artment of State's records.	date will not be listed as th
adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendmen icient for approval.	t(s)
The amendment(s) was/were appromust be separately provided for e	oved by the shareholders through voting groups. The following states ach voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
bv	(voting group)	
	(voting group)	
The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and sharehol	der
The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder	
selected.	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other cod fiduciary by that fiduciary)	n urt
	ran T. Barnes, Jr	
<u>-</u>	(Typed or printed name of person signing)	
	A(x)	