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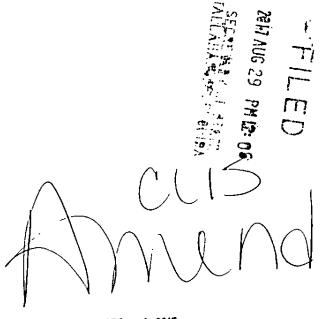
(Re	equestor's Name)	- :
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PICK-UP	WAIT	MAIL
(Bı	usiness Entity Name	e)
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Certified Copies		Status V
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: airko Fleight Systems, Inc.
DOCUMENT NUMBER: () FFF
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Willie mae Hill goes by me or ms. Hell
Airko Freight Systems, Inc.
Airko Freight Systems, Irc. P.O. Box 18102 AMF
City/State and Zip Code
City/ State and Zip Code
Airko o bell south, net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Willie Mae Hill or Susan Hill att 94/449-2569(cell) 4251
Name of Contact Person Area Code & Daytime Telephone Number (home
Einclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

Clitton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

Articles of Amendment

Articles of Inco	rporation		
Airko Freigh	+ Systems Inc		
(Name of Corporation as currently	filed with the Florida Dept. of State)	
4722			
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this F its Articles of Incorporation:	Florida Profit Corporation adopts the fo	ollowing amenda	nent(s) to
A. If amending name, enter the new name of the corporation:			
		The ne	'u'
name must be distinguishable and contain the word "corporation "Corp." "Inc." or Co.," or the designation "Corp." "Inc." or "Coword "chartered," "professional association." or the abbreviation "I	o". A professional corporation name		
B. Enter new principal office address, if applicable:			_
(Principal office address <u>MUST BE A STREET ADDRESS</u>)			
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		29 III AUG 29 PH	FILEC
D. If amending the registered agent and/or registered office addre		- F. F.	\cup
new registered agent and/or the new registered of fice address:		2	
Name of New Registered Agent			
tFlorida stre	et address)		
New Registered Office Address:	Florida		
Kan Mighton Origine Thanks.	City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. Tam familiar w	ith and accept the obligations of the vo	sition	
, and the same of	and the second s	-	

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; F. Treasurer, S. Secretory; D. Director; FR. 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: <u>X</u> Change	<u>PT John Do</u>	<u>v.</u>	
\underline{X} Remove	<u>V</u> <u>Mike Jo</u>	<u>nes</u>	
<u>X</u> Add	<u>SV</u> <u>Sally Sn</u>	<u>sith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	A. Lamartill	2242 HIRSCH CO
Add			Joeksonville
Remove			FL 32216
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4)Change			
Add			
Remove			
51 Change			
AdJ			
Remove			
6)Change			
Add			
Remove			

	sheets, if necessary)	. (Be specific)				
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provisions for in	provides for an exemplementing the americal N/A)	change, reclassifi rendment if not c	ication, or cancell ontained in the ar	ation of issued sha nendment itself:	ires,	
						- -
		·				
				<u> </u>		
			·			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(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 document's effective date on the Department of State's records.	will 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 east for the amendment(s) was/were sufficient for approval	
by	
by	
☐ 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	
Signature & Willie Man Hill	-
(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)	
Willie Mae Hill (Typed or printed name of person signing)	
Prosident (Title of person signing)	
(Title of person signing)	