F0400005330

•		
(Re	equestor's Name)	
<u> </u>	idress)	
1		
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





800095156048

04/03/07--01036--014 **185.00

K



O7 APR -3 AH II: OL

COVER LETTER

Division of Corporations
SUBJECT: NAME CHANGE Airborne FTZ, Inc. (Name of Corporation)
DOCUMENT NUMBER: Fo 4000005330
The enclosed Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lynn Blake (Name of Contact Person)
ABX AIR Inc. (Firm/Company)
145 HUNTER DRIVE, 2061-N (Address) Wilmington OH 451.77 (City/State and Zip Code)
Wilmington OH 451.7.7 (City/State and Zip Code)
For further information concerning this matter, please call:
Lynn Blake at (937) 366 - 2662 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)
Mailing Address: Street Address:

Amendment Section Division of Corporations P.O. Box 6327

TO:

Amendment Section

Tallahassee, FL 32314

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

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

. (Pursuant to s. 607.1504, F.S.)
SECTION I (1-3 MUST BE COMPLETED)
(Document number of corporation (if known)
1. Airborne FT:2, Inc. (Name of corporation as it appears on the records of the Department of State)
2. State of Ohio (Incorporated under laws of) 3. (Date authorized to do business in Florida)
SECTION II (4-7 COMPLETE ONLY THE APPLICABLE CHANGES)
4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 6 15 06 6 ABX Material Services Inc.
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation) (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting
business in Florida) 6. If the amendment changes the period of duration, indicate new period of duration.
(New duration) 7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.
(New jurisdiction) (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)
(Typed or printed name of person signing) Director (Title of person signing)

JATE: DOCUMENT ID 06/16/2006 200616701378 DESCRIPTION DOMESTIC/AMENDMENT TO ARTICLES (AMD) FILING 50.00 EXPED 100.00

PENALTY

CERT

COPY

Receipt

This is not a bill. Please do not remit payment.

VORYS, SATER, SEYMOUR & PEASE 52 E. GAY STREET COLUMBUS, OH 43215

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, J. Kenneth Blackwell

599738

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

ABX MATERIAL SERVICES, INC.

and, that said business records show the filing and recording of:

Document(s)

DOMESTIC/AMENDMENT TO ARTICLES

Document No(s):

200616701376



United States of America State of Ohio Office of the Secretary of State Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 15th day of June, A.D. 2006.

Ohio Secretary of State

Cuneth (Sa



541

Prescribed by J. Kenneth Blackwell

Ohio Secretary of State
Central Ohio (614) 466-3910
Toll Free, 1-877-SOS-FILE (1-877-767-3453)

www.state.oh.us/sos e-mail: busserv@sos.state.oh.us Certificate of Amendment by Shareholders or Members (Domestic) Filing Fee \$50.00

1) Domestic for Profit	PLEASE READ INSTRUCTIONS	(2) Domestic Non-Profit	
Amended	✓ Amendment	Amended	Amendment
(122-AMAP)	(125-AMDS)	(128-AMAN)	(128-AMD)
			•
complete the general infor	mation in this section for the box checi	red above.	
Name of Corporation	Airborne F T Z, inc.		·
Charter Number	599738		
Name of Officer	W. Joseph Payne		
 Fitte	Secretary	·	, ,
Please check if additional	provisions attached .		: 5
he above named Ohio co	rporation, does hereby certify that		
A meeting of the	shareholders	directors (non-pro	fit amended articles only)
members was duly call	ed and held on		7 2.
		ste)	
	was present in person or by proxy, b d them to exercise	ased upon the quorum pres as the voting power of the	
ote was cast which entitle In a writing signed by a members who would be articles of regulations o	If of the	lors (non-profit amended article such other proportion not le	s only) ss than a majority as the
In a writing signed by a members who would be	e entitled to the notice of a meeting or	lofs (non-profit amended article such other proportion not le	s only) ss than a majority as the
In a writing signed by a members who would be	e entitled to the notice of a meeting or r bylaws permit	lofs (non-profit amended article such other proportion not le	e only) ss than a majority as the
In a writing signed by a members who would be articles of regulations o	e entitled to the notice of a meeting or r bylaws permit	such other proportion not le	ss than a majority as the
In a writing signed by a members who would be articles of regulations of regulati	e entitled to the notice of a meeting or r bylaws permit pox is checked.	such other proportion not le	ss than a majority as the
In a writing signed by a members who would be articles of regulations of regulati	e entitled to the notice of a meeting or r bylaws permit	such other proportion not le	ss than a majority as the
In a writing signed by a members who would be articles of regulations of regulati	e entitled to the notice of a meeting or r bylaws permit pox is checked.	such other proportion not le	ss than a majority as the

Last Revised May 2002

IRST:	The name of the	comoration is:	ABX Material Service	es. Inc.		
		•	ere ite principal office		City of:	,
	(city, village or towns!	hlp)		(county)		
HIRD:	The purposes of	the compretion a	re as follows:			
	<u> </u>					
	<u> </u>					
нтяио	The number of sh		corporation is authority not apply to box (2		nding is:	
·	REQUIRED					5, 2006
fust be a signed)	REQUIRED uthenticated by an authorized		not apply to box (2			
lust be a ligned) present	REQUIRED uthenticaled by an authorized ative	Authorized Re	not apply to box (2		June <u>i</u>	ite .

541

Page 2 of 2

Last Revised: May 200