## L#000031747

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## **COVER LETTER**

TO:

TO:	Registration Section Division of Corpo				
SUBJE	CT:	International A	irline Solutions, LL	.C	
		Name of Limite	ed Liability Company		
The enc	losed Articles of Ar	nendment and fee(s) are subr	nitted for filing.	s	
		lence concerning this matter t	_	· · ·	
			Stella Esquivel	艺术	and the second
		Internati	onal Airline Solutions	HON 28 PA	STATE OF THE STATE
			Firm/Company	SEE S	
		15	5016 SW 90th Street Address	- CORDINATE OR OF THE CORDINATE OF THE C	.59
			Miami, FL 33196	<u> </u>	
			City/State and Zip Code  es@skyking-usa.com be used for future annual repo		
For furti	her information con	cerning this matter, please ca	_	on nomically	
		a Esquivel	at ( 305 )	385-4722	
	Name of F	erson	Area Code &	Daytime Telephone Number	
Enclose	d is a check for the	following amount:			
<b>₹2</b> 5.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is er	Sectificate of Status & Certificate Copy (additional copy is enclosed)	osed)
	Registrate Division P.O. Box	G ADDRESS: ion Section of Corporations 6327 ee, FL 32314	Registration Division of Clifton Buil	Corporations	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Internation	<u>ial Airline Solution L</u>	LC
(Name of the Limited Liabilit (A Florida	ty Company as it now appea Limited Liability Company)	rs on our records.)
(11101000	Emmos Buoming Company)	San Constant
The Articles of Organization for this Limited Liability	Company were filed on	March 14, 2011 and signed
Florida document number L11000031749	·	SEE P
This amendment is submitted to amend the following:		FLORIDA FLORIDA
A. If amending name, enter the new name of the lin	<u>nited liability company he</u>	<u>re</u> :
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Comp	any," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
,		
(Mailing address MAY BE A POST OFFICE BOX)	- <u></u>	
B. If amending the registered agent and/or regis		our records, enter the name of the new
registered agent and/or the new registered office ad-	dress here:	
Name of New Registered Agent:		
New Registered Office Address:		T1 1 . 1
	E.	nter Florida street address
		, Florida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Intl. Airline Solutions, Inc	15016 SW 90th Street Miami, FL 33196	Add Remove
			Add Remove
	<del></del>		Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter cha	nge(s) here: (Attach additional sheets, if necessary.)	_
			<del></del>
			<del></del>
Dated	November 23 ,	2012	
	Signature of a member	ber or authorized representative of a member	<del></del>
	Тур	Stella Esquivel sed or printed name of signee	<u> </u>

Page 2 of 2

Filing Fee: \$25.00