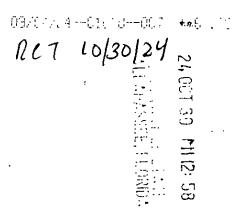
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: SHOW ROON ELITE LLG					
DOCUMENT NUMBER: <u>L 23000,554/98</u>					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
EVen And ULYSSE Name of Contact Person					
Firm/ Company					
610 NortH Dixie Hwy					
Lantana FL 33462 City/ State and Zip Code					
E-mail address: (to be used for Juture annual report notification)					
For further information concerning this matter, please call:					
EVENNUA ULYSSE at (561) 262-4858 Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations					

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation

of

SHOW BOOM FLITE ILC		
	tly filed with the Florida Dept. of State)	
1 23000.554198		
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)) to
A. If amending name, enter the new name of the corporation:		
ULVISSE FLITE LOGISTIC	The new	
name must be distinguishable and contain the word "corporation," ' "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word	
B. Enter new principal office address, if applicable:	24	
(Principal office address MUST BE A STREET ADDRESS)		
	30	
	m :	
C. Enter new mailing address, if applicable:	1/1/ WOST 1 CATE ROAC	↲
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	401 WEY CATTONE	•
	578	
	Lantaga FL 33462	
D. If amending the registered agent and/or registered office add	dress in Florida, enter the name of the	
new registered agent and/or the new registered office address		
Name of New Registered Agent		
(Florida st	treet address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agen	it:	
Thereby accept the appointment as registered agent. I am familiar		
Signature of New I	Registered Agent, if changing	
Check if applicable		
The amendment(s) is/are being filed nursuant to s. 607.0120.(11))(e) FS	

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)

Example:

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>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Joi	nes	
X Add	<u>sv</u>	Sally Sn	<u>rith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Address</u>
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if n	necessary). (Be specific)				
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f an amendment provides because for implementing	<u>for an exchang</u>	ge, reclassifica	<u>ition, or cancel</u>	mondment itsel	shares, r	
provisions for implementing (if not applicable, indic	ate N/A)	ment in more con	<u>ntantea in tae a</u>	mengment tiser	<u></u>	
						
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145 -						

	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amer	adment file date)
Note: If the date inserted in this document's effective date on the D		ing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors	without shareholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes ufficient for approval.	s cast for the amendment(s)
•	proved by the shareholders through voting grour each voting group entitled to vote separately o	
"The number of votes cas	for the amendment(s) was/were sufficient for a	pproval
by	(voting group)	··
	(voting group)	
selecto	lifector, president or other officer – if directors of the directors of th	or officers have not been iver, trustee, or other court
	EVen Aud ULYSSE (Typed or printed name of person se	igning)
	CEO (Title of person signing)	