(R	equestor's Name)	
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(A	ddress)	
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	RATION: Airline	Alliance Intern	ational Inc.
DOCUMENT NUME	BER: PO1000	000607	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Andrew W	<i>lhite</i>	
•	Airline Al	Name of Contact Person Viance Internation	ral
		Newport Ctr.	Dr.
	Deerfield R	Beach PL 3	3442_
	0.00	City/ State and Zip Code	
		as as pares. co	
	E-mail address: (to be us	sed for future annual report n	otification)
For further information	concerning this matter, pleas	se call:	
Andrew	While	at (954	429-8600
Name o	of Contact Person	Area Code	& Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depart	ment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi	ling Address ndment Section sion of Corporations Box 6327		nent Section of Corporations

2661 Executive Center Circle Tallahassee, FL 32301



July 25, 2012

ANDREW WHITE AIRLINE ALLIANCE INTERNATIONAL, INC. 1022 EAST NEWPORT CTR. DR. DEERFIELD BEACH, FL 33442

SUBJECT: AIRLINE ALLIANCE INTERNATIONAL, INC.

Ref. Number: P0100000607

We have received your document for AIRLINE ALLIANCE INTERNATIONAL, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

You failed to sign the document.

The name and title of the person signing the document must be noted beneath or opposite the signature.

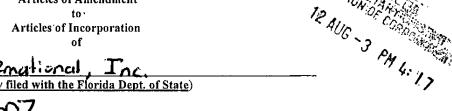
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 212A00019562

Articles of Amendment to



(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

sa must ha distinguishable and contain the word	"agrangedian" "agranged"	" on "incorpor	The
ne must be distinguishable and contain the word orp.," "Inc.," or Co.," or the designation "Corp," d "chartered," "professional association," or the ab	"Inc," or "Co". A profess		
Enter new principal office address, if applicable: Incipal office address <u>MUST BE A STREET ADDR</u>	<u>ESS</u>)		
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
If amending the registered agent and/or registered new registered of		enter the name	e of the
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:	(City)	, Florida_	(Zip Code)

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.

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	D	Ellsworth, Kerry	1022 East Napart Center D. DEERFIELD BEACH PL 334
2) Change Add Remove	\overline{D}	Shannon, Ashley	1022 East Newport Center Or. Deersield Besch FL 33442
3) Change Add Remove			
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)
. <u>]</u>	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)

The date of each amendment(s) a	doption: July 16, LOIZ
Effective date <u>if applicable</u> :	July 23, 2012
,	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
action was not required.	spired by the incorporators without strateholder action and shareholder
Dated	8/1/12
Signature	achly Sam
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court attend fiduciary by that fiduciary)
	Ashley Shamon (Typed or printed name of person signing)
	-
	Director
	(Title of person signing)