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	Requestor's Name		
	1000 PONCE DE LEON BLVD Address	o. SUITE:101	
	CORAL GABLES, FL 33134 City/State/Zip	(305) 444-4994 Phone #	
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CO	DRPORATION NAME(s) &	DOCUMENT NUM	BER(S) (if known):
(I.	SKY TYDS+ (Corporation Name)	INC	P050000V587V
2.	(Colporation Mains)		(2004)1811(4)
	(Corporation Name)		(Document #)
3. (Corporation Name) (Document #)		(Document #)	
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	(Corporation Name)		(Document #)
Walk in Pick up time Certified Copy			_ Certified Copy
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	NEW FILINGS	AMENDME	NTS
	Profit	Amendment	
NonProfit Resignation of R.A.		Resignation of R	.A., Officer/ Director
Limited Liability Change of Register		Change of Regist	tered Agent
	Domestication	Dissolution/With	drawal
	Other	Merger	
OTHER FILINGS REGISTRATION/ QUALIFICATION			
	Annual Report	Foreign	
Fictitious Name Limited Partnership			in .
	Name Reservation	Reinstatement	-
		Trademark	

Other

Examiner's Initials

EXPRESS CORPORATE FILING SERVICE INC.

Articles of Amendment to Articles of Incorporation

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SECRETARY OF STATE

SKY TRUST INC

(Name of corporation as currently filed with the Florida Dept. of State). FLORIDA

P05000065876

(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:

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

<u>AMENDMENTS ADOPTED</u>- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (<u>BE SPECIFIC</u>)

ARTICLE VII.-THE NEW BOARD OF OFFICER'S/DIRECTORS

ARE:

MAX DELGADO AS PRESIDENT WITH ADDRESS AT:

10300 SW 24 ST. MIAMI,FL 33165.

MIGUEL DELGADO AS VICEPRESIDENT WITH ADDRESS AT:

13032 SW 133 CT. MIAMI,FL 33186

JOSE QUIROZ AS VICEPRESIDENT WITH ADDRESS AT:

10321 SW 142 CT, MIAMI, FL 33186

ARTICLE V.- THE NEW REGISTERD AGENT IS JOSE QUIROZ

(Attach additional pages if necessary)

If an amendment provides for 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)

JOSE QUIROZ 400 SHARES 20% BUSINESS OWNER

MAX DELGADO 800 SHARES 40% BUSINESS OWNER

MIGUEL DELGADO 800 SHARES 40% BUSINESS OWNER

(continued)

The date of each amendment(s) adoption: 10/11/2005
Effective date if applicable: 10/11/2005
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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 cast for the amendment(s) was/were sufficient for approval by
(voting group)
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.
Signature (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)
MIGUEL DELGADO
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Rogistered Agent) (Date)
If signing on behalf of an entity:
JOSE QUIROZ (Typed or Printed Name)