060001502 Division of Corporations

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000300890 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0380

Account Name : THE LAW OFFICES OF NICK SPRADLIN, PLLC

Account Number : I20060000146

Phone : (813)435-3176 Fax Number : (813)333-6358

COR AMND/RESTATE/CORRECT OR O/D RESIGN

AIRBORNE ABILITIES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu

Help

Dec se sook

Dec 26 260% 5:52PM - Fax Station : The LAW OFFICES OF NICK SPRAID IN PLIC

850-205-0381

12/26/2006 4:54 PAGE 001/001

Florida Dept of State



December 26, 2006

PLORIDA DEPARTMENT OF STATE
Division of Corporations

AIRBORNE ABILITIES, INC. 1405 JEAN STREET LUTZ, FL 33548U8

SUBJECT: AIRBORNE ABILITIES, INC.

REF: P06000150293

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document is not signed.

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) 245-6901.

Susan Payne Senior Section Administrator FAX Aud. #: H06000300890 Letter Number: 906A00072562

* RECEIVED

06 DEC 27 AM 8: 00

P.O BOX 6327 - Tallahassee, Florida 32314



Articles of Amendment to Articles of Incorporation of

AIRBORNE ABILITIES, INC.	
(Name of corporation as currently filed w	th the Florida Dept. of State)
P06000150293	
(Document number of corpor	ation (if known)
Pursuant to the provisions of section 607.1006, Florida S adopts the following amendment(s) to its Articles of Inco	
NEW CORPORATE NAME (if changing):	
Must contain the word "corporation," "company," or "incorporated" A professional corporation must contain the word "chartered", "pro	or the abbreviation "Corp.," "Inc.," or "Co.") fessional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED - (OTHER THAN NAMI and/or Article Title(s) being amended, added or deleted:	
FIRST: PRINCIPAL PLACE OF BUSINESS AD	DRESS WILL BE CHANGED TO
PTY 1850 7979 NW 21st STREET, DORAL, FL	ORIDA 33122
SECOND: THE CORPORATE MAILING ADDRI	ESS WILL BE CHANGED TO
PTY 1850 7979 NW 21st STREET, DORAL, FLOI	RIDA 33122
THIRD: MARIANELLA SPRADLIN WILL BE REMO	OVED AS DIRECTOR, PRESIDENT,
SECRETARY AND TREASURER.	
FOURTH: Kay Winkler WILL BE PRESIDEN	T
FIFTH: Kay Winkler WILL BE SECRETARY	•
SIXTH: Kay Winkier WILL BE TREASURER SEVE	NTH: Kay Winkler WILL BE DIRECTOR
(Attach additional pages i	f necessary)
f an amendment provides for exchange, reclassification, for implementing the amendment if not contained in the a	

(continued)

The date of each amendment(s) adoption: 11/22/06		
Effective date if applicable:	·	
 .	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
	was/were approved by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.	
	was/were approved by the shareholders through voting groups. The at must be separately provided for each voting group entitled to vote amendment(s):	
"The number o	f votes east for the amendment(s) was/were sufficient for approval by	
	(voting group)	
	was/were adopted by the board of directors without shareholder action tion was not required.	
The amendment(s) shareholder action	was/were adopted by the incorporators without shareholder action and was not required.	
Signature	Hande ella	
selec	director, president or other officer - if directors or officers have not been sted, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
МД	RIANELLA SPRADLIN	
WIT	(Typed or printed name of person signing)	
PR	ESIDENT AND DIRECTOR	
	(Title of person signing)	

FILING FEE: \$35