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.

(((H10000257961 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : AIT PLUS CONSULTING

Account Number: 120080000061 Phone : (407)582-9830 Fax Number : (407)582~9832

\*\*Enter the email address for this business entity to be used fo annual report mailings. Enter only one email address please.

P	÷	7	Address:

## COR AMND/RESTATE/CORRECT OR O/D RESIGN ORLANDO PREMIUM TRANS, INC.

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DEC-03-2010 16:47

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION:U	RLANDO PREMIUM TRANS,	INC.		
DOCUMENT NU	NUMBER: P07000059905				
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.			
Please return all co	orrespondence concerning th	is matter to the following:			
	TARSIO M ELEUTERIO				
	7	Name of Contact Person			
	ORLAND	O PREMIUM TRANS, INC.			
		Firm/ Company			
	8421 S ORANGE BLOSSOM TRAIL SUITE 112				
	Address				
	O	RLANDO, FL 32809			
		City/ State and Zip Code			
	mar E-mail address: (to be us	ia@aitplus.com ed for future annual report notification)			
For further inform	ation concerning this matter	, please call:			
M	ARIA PINHEIRO	at ( 407 ) 582  Area Code & Daytime Telepl	-9830		
Name	of Contact Person	Area Code & Daytime Telepl	hone Number		
Enclosed is a chec	k for the following amount i	made payable to the Florida Departm	ent of State:		
☐\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building	4		
Tallahasse	e, FL 32314	2661 Executive Center Circle			

AIT

Articles of Amendment to

FILED

Articles of Incorporation

of	2010 DEC -3 AM 98 31
ORLANDO PREMIUM TR	RANS, INC SECRETARY OF STATE
(Name of Corporation as currently filed with	the Florida Dept. of State ASSEE, FLORIDA
P07000059905	<u> </u>
(Document Number of Corporat	tion (if known)
Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:	ites, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	on:
name must be distinguishable and contain the word "corp abbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional association of the contain the word "chartered,"	Corp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	8421 S ORANGE BLOSSOM TRL
	SUITE 112
•	ORLANDO, FL 32809
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8421 S ORANGE BLOSSOM TRL
	SUITE 112 ORLANDO, FL 32809
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad Name of New Registered Agent:	e address in Florida, enter the name of the dress:

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

New Registered Office Address:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

(City)

Signature of New Registered Agent, if changing

(Florida street address)

\_, 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)

Title -	Name	Address	Type of Action
VP	Dynamic Events Consulting	8421 S ORANGE BLOSSOM TR SUITE 112 ORLANDO, FL 32809	☑ Add □ Remove
<u>MGR</u>	Carlos T. De Almeida	8421.S ORANGE BLOSSOM TR SUITE 112 ORLANDO, FL 32809	☐ Add ☑ Remove
		,	☐ Add ☐ Remove
E. If amending (attach addit	g or adding additional Articles, enter citional sheets, if necessary). (Be specific	hange(s) here:	
provisions	dment provides for an exchange, recla for implementing the amendment if no applicable, indicate N/A)	ssification, or cancellation of iss of contained in the amendment i	ued shares, tself:
			<u></u>

DEC-	-03-2010 16:48	TIA	4075829832 P.
	The date of each amendme	nt(s) adoption: 11/30/2010	OFTENDO
•		(date of adoption is	required)
	Effective date if applicable:	(no more than 90 days after amendmer	nt file date)
	£	(1.2.1.2.7.2.1.1.1.2.7.2.1.2.7.2.1.2.7.2.1.2.7.2.1.2.7.2.1.2.7.2.2.7.2.2.7.2.2.7.2.2.2.2	
	Adoption of Amendment(s)	(CHECK ONE)	
		vere adopted by the shareholders. The nurwere sufficient for approval.	nber of votes cast for the amendment(s)
		vere approved by the shareholders through ded for each voting group entitled to vote.	
	"The number of vote	es cast for the amendment(s) was/were suf	ficient for approval
	by		.,,,
	· - <del></del> , · - <del></del>	(voting group)	
	action was not required.	vere adopted by the board of directors with	
	Dated 11/	/30/2010	
	Signature	× 1	
	se	By a director, president or other officer — is elected, by an incorporator — if in the hand oppointed fiduciary by that fiduciary)	
•		TARSIO M ELEU	JTERIO
		(Typed or printed name of	person signing)
		PRESIDE	NT
		(Title of person signing)	