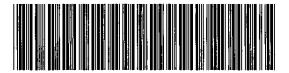
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COVER LETTER

Division of Corporations ,
NAME OF CORPORATION: FIRST AIRBORNE SERVICE TRADING CORP
DOCUMENT NUMBER: P0900000673
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Maria G Carrasco
Name of Contact Person
First Airborne Service Trading Corp
Firm/ Company
4005 NW 114 Ave S-14
Address
Doral, FL 33178
City/ State and Zip Code
nachavez@bellsouth.net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Maria G Carrasco <u>at (305 484-2927</u>
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:

Mailing Address

□ \$35 Filing Fee

٠,

TO: Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

□\$43.75 Filing Fee &

Certificate of Status

Street Address

■\$43.75 Filing Fee &

Certified Copy (Additional copy is

enclosed)

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed),

Certificate of Status

التنب

Articles of Amendment to Articles of Incorporation of

FIRST AIRBORNE SERVICE TRADING CORP

THO ANDONIL DERVICE IT	VADINO CON
(Name of Corporation as currently file	led with the Florida Dept. of State)
P0900000673	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
N/A	The new
	d "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable	_. 4005 NW 114 AVE S-14
(Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	PANZ: 32
D. If amending the registered agent and/or register new registered agent and/or the new registered	red office address in Florida, enter the name of the
	G Carrasco
	IW 114 Ave S-14
	(Florida street address)
New Registered Office Address: Doral	, Florida 33178
New Neglisiel eu Office Audi ess.	(City) (Zip Code)
Ges	zistered Agent: I am familiar with and accept the obligations of the position. ew Registered Agent, if changing

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.

Example: X Change	PT John	Doe	
X Remove	V Mike	e Jones	·
_X Add	SV Sally	/ Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	PDS	Rafael Asca	2320 Bayview Lane
Add			North Miami FL 33180
X Remove			
2) Change	PDS	Maria G Carrasco	2320 Bayview Lane
X_{Add}		_	North Miami FL 33180
Remove			
3) Change	VPDT	Maria G Carrasco	2320 Bayview Lane
Add			North Miami FL 33180
X Remove		•	
4) Change			
Add			
Remove			
5) Change		·	
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Respective)
	(Бе specific)
V/A	
	•
•	
If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
·	
·	

The date of each amendment(s) adoption: 11/12/2012		
Effective date if applicable: 11	/12/2012	
	(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) ifficient for approval.	
☐ The amendment(s) was/were app must be separately provided for	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)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated 11/12/	2012	
Signature	Gres	
(By a d	lirector, 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 ated fiduciary by that fiduciary)	
	Maria G Carrasco	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	