## P09000057089

| (Re                     | equestor's Name)   |                 |
|-------------------------|--------------------|-----------------|
| (Ac                     | ddress)            |                 |
| (Ac                     | ddress)            |                 |
| (Ci                     | ty/State/Zip/Phone | <del>;</del> #) |
| PICK-UP                 | ☐ WAIT             | MAIL            |
| (Bı                     | usiness Entity Nan | ne)             |
| ·                       |                    | ,               |
| (Do                     | ocument Number)    |                 |
| Certified Copies        | _ Certificates     | of Status       |
| Special Instructions to | Filing Officer:    |                 |
|                         |                    |                 |
|                         |                    |                 |
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Office Use Only



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SEGRETARY OF STATE
ALL AHASSEF OF ORION

Amera

'APR 9 2012

T. LEWIS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

|                            | ATION: <u>AEROEXP</u><br>ER: <u>PO90000570</u>  |  | SINC  |  |
|----------------------------|---|--|---|--|
| The enclosed Articles of   | f Amendment and fee are su  | bmitted for filing.  |   |  |
| Please return all corresp  | ondence concerning this ma  | itter to the following:  |   |  |
| (                          | CELMIRA D. GA   | LLEGO  |   |  |
| _                          |   | Name of Contact Per  | rson  |  |
|                            | AEROEXPRESS   |  |   |  |
|                            | 10314 WEST SA   | Firm/ Company  |   |  |
| -                          | 10014 WEGT OA   | Address  |   |  |
| (                          | CORAL SPRING  |  |   |  |
| _                          | · · · · · · · · · · · · · · · · · · ·   | City/ State and Zip C  | ode   |  |
| GCE                        | ELMY@AEROEX   | (PRESSENVI   | OS.COM  |  |
| <del></del>                | E-mail address: (to be us   |  |   |  |
| For further information    | concerning this matter, pleas   | e call:  |   |  |
| CELMIRA GA                 | LLEGO   | at ( 954   | 341-4088  |  |
| Name of                    | Contact Person  | Area   | Code & Daytime Telephone Number   |  |
| Enclosed is a check for t  | he following amount made p  | payable to the Florida De  | epartment of State:   |  |
| \$35 Filing Fee            | ☐\$43.75 Filing Fee & Certificate of Status   | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | Certificate of Status Certified Copy (Additional Copy is enclosed)                                    |  |
| Ameno<br>Divisio<br>P.O. B | dress | Ame<br>Divi<br>Clift<br>2661                                       | et Address  ndment Section sion of Corporations on Building Executive Center Circle thassee, FL 32301 |  |

## Articles of Amendment to Articles of Incorporation of

FILED 12 APR -6 AMII: 05

2.

## AEROEXPRESS ENVIOS, INC

SEGRETARY OF STATE TALLAHASSEE PLORIDA

| (Name of Corporation as currently filed with the   | Florida Dept. of State) IALLAHASSEE PLORIT                        |
|--|---|
| PO9000057089   |   |
| (Document Number of Corporation  | (if known)  |
| Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:   | s Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation:  |   |
|  | The new   |
| name must be distinguishable and contain the word "corporati<br>"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must contain the            |
| B. Enter new principal office address, if applicable:  | 10314 WEST SAMPLE RD  |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )  | CORAL SPRINGS FL 33065  |
|  |   |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  | 10314 WEST SAMPLE RD  |
| · · · · · · · · · · · · · · · · · · ·  | CORAL SPRINGS FL 33065  |
|  |   |
| D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address   |   |
| Name of New Registered Agent   |   |
| (Florida st  | reel address)   |
| New Registered Office Address:   | , Florida   |
| (City,   | (Zip Code)  |
| New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar  | with and accept the obligations of the position.                  |
| Signature of New Registered  | Agent it 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 <math>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:  | <u>PT</u>    | <u>John Doe</u>  |   |
|---|--------------|------------------|---|
| X Remove  | <u>v</u>     | Mike Jones       |   |
| X Add   | <u>sv</u>    | Sally Smith      |   |
| Type of Action<br>(Check One)                   | <u>Title</u> | <u>Name</u>      | <u>Addres</u> s                                       |
| 1) × Change                                     | Р            | JAIME MOLINA     | 2346 NW 36 AVE  |
| Add<br>Remove                                   |              |                  | COCONUT CREEK FL 33066                                |
| 2) <u>×                                    </u> | v            | ALVARO L, OCAMPO | 3057 CORAL SPRINGS DR # 204<br>CORAL SPRINGS FL 33065 |
| Remove  3 ) X Change                            | <u>T</u>     | CELMIRA GALLEGO  | 3057 CORAL SPRINGS DR # 204                           |
| Add<br>Remove                                   |              |                  | CORAL SPRINGS FL 33065                                |
| 4) × Change Add Remove                          | D            | LUIS E USUGA     | 16419 SAPPIRE DR<br>WESTON FL 33331                   |
| Change Add Remove                               |              |                  |   |
| 6) Change<br>Add<br>Remove                      |              |                  |   |

| ARTICL           | E III                                  |                 |                      |                    |                          |                            |                              |                           |                      |
|------------------|--|-----------------|----------------------|--------------------|--------------------------|----------------------------|------------------------------|---------------------------|----------------------|
| Change           | from                                   | MONEY           | TRANCEE              | פער פער            | CARCO                    | CEDUTAL                    | WORLDWI                      |                           | - <u>-</u>           |
| <u></u>          | 11011                                  | HONEL           | IKANSFE              | <u> </u>           | CARGO                    | SERVICE                    | <u>: WOKTDWI</u>             | DE                        |                      |
|                  |  |                 |                      |                    |                          |                            | <del> </del>                 | <del></del>               |                      |
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| <u>provision</u> | ndment pi<br>is for imp<br>oi applicab | <u>lementin</u> | ig the amer          | ange, re<br>idment | classifica<br>if not con | tion, or ca<br>tained in t | ncellation of<br>the amendme | issued sha<br>ent itself: | res,                 |
| · _ ·            |  | <b>_</b>        |                      |                    |                          |                            |                              |                           |                      |
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| , · · · ·  | 0//20/20/2   |
|--|--|
| The date of each amendment(s) ac                               | loption: 04/02/2012  |
| Effective date if applicable:                                  |  |
|  | (no more than 90 days after amendment file date)   |
| Adoption of Amendment(s)                                       | (CHECK ONE)  |
| The amendment(s) was/were ado by the shareholders was/were suf | pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.   |
| The amendment(s) was/were appropriately provided for a         | roved 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 f                                    | for the amendment(s) was/were sufficient for approval  |
| by   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,  |
|  | (voting group)   |
| ☐ The amendment(s) was/were adoptaction was not required.      | oted by the board of directors without shareholder action and shareholder  |
| The amendment(s) was/were adoptaction was not required.        | oted by the incorporators without shareholder action and shareholder   |
| Dated 04/02/2  | 2012   |
| Signature  | Withelf !  |
| (By a dir selected,  | rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court didiciary by that fiduciary) |
|  | CELMIRA GALLEGO  |
| _  | (Typed or printed name of person signing)  |
| F  | REGISTERED AGENT / T   |
|  | (Title of person signing)  |