P09000086073

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Amend.

NOV 2 5 2009

COVER LETTER

TO: Amendment Section

AL INFLIGHT SERVICES, INC.
00086073
bmitted for filing.
tter to the following:
AENZ
of Contact Person
AND ASSOCIATES CPÁS P.A.
rm/ Company
NW 36TH STREET SUITE 100 Address
Address
231//
FLORIOA 33/66 tate and Zip Code
PAOL. Com
future annual report notification)
se call:
at (<u>305</u>) <u>216-7872</u> Area Code & Daytime Telephone Number
Area Code & Daytime Telephone Number
payable to the Florida Department of State:
□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)
Street Address
Amendment Section
Division of Corporations
Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	16HT SERV		
(Name of Corporation as curren			
P 09 00 00	86073 er of Corporation (if know		
/ (Document Number	er of Corporation (if know	vn)	
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this Flo	orida Profit Corporation	adopts the following
A. If amending name, enter the new name of t	he corporation:		
			The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the doname must contain the word "chartered," "profes	esignation "Corp," "Inc, ssional association," or 1	" or "Co". A profession	
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE D. If amending the registered agent and/or regnew registered agent and/or the new registered Agent: Name of New Registered Agent: New Registered Office Address:	gistered office address in		09 NOV 18 AM 9: 42
·	<u>.</u>	, Florida	· · · · · · · · · · · · · · · · · · ·
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age			of the position.

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
VP	RIVIEN MURPHY	MIAMI FLORIDA	Add Remove
		33166	-
			_
	ling or adding additional Articles, enter dditional sheets, if necessary). (Be specif		
			,
		,	
provisio	nendment provides for an exchange, recomes for implementing the amendment if of applicable, indicate N/A)	lassification, or cancellation of is not contained in the amendment	sued shares, itself:
	To 1 /		

The date of each amendment(s) adopti	ion: 19 TH	November	2009
Effective date if applicable:	(date of add	option is required) NOVEMBER	2009
(no more	than 90 days after a	mendment file date)	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted by the shareholders was/were sufficient		The number of votes cas	st for the amendment(s
The amendment(s) was/were approve must be separately provided for each			
"The number of votes cast for th	e amendment(s) was/	were sufficient for approv	val
by(voting g	roun)		
☐ The amendment(s) was/were adopted action was not required. ☐ The amendment(s) was/were adopted action was not required.	I by the incorporators	without shareholder action	
Signature (By a director selected, by a	r, president or other o	fficer – if directors or offithe hands of a receiver, try)	
· · · · · · · · · · · · · · · · · · ·		monthy name of person signing)	
	Secre (Title of person signi		<u>.</u>