P09000088429

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SECRETARY OF STATE

Amend

JUN -2 2014

T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: VICTORIA BER: P0900008842	AVIATION SER	VICES, INC	
DOCUMENT NUMI	3ER: 1 0000000012			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	JULIO MEJIA			
		Name of Contact Person		
	VICTORIA AVIAT	TION SERVICES	S, INC	
		Firm/ Company		
	241 NE PRIMA V	ISTA BLVD		
		Address		
	PORT ST LUCIE	FL 34983		
		City/ State and Zip Cod	0	
GU	ERLINEPOP@YA	VHOO COM		
<u> </u>		ed for future annual report	notification)	
	D man address. (to be dis	ica for fatare annual report	Hottifeationy	
For further information	n concerning this matter, pleas	e call:		
JULIO MEJIA	A	at (772	6264686 de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Street Address		Address		
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations' Clifton Building		
Tallahassee, FL 32314			2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



VICTORIA AVIATION SERVICES, INC

14 MAY 19 AHII: 43

(Name of Corporation as currently filed with the Flo	orida Dent of State)
P0900088429	,
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Ilorida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Coword "chartered," "professional association," or the abbreviation "F	o". A professional corporation name must contain the
D. Fatanana administrative of the state of t	N/A
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office addre	
new registered agent and/or the new registered office address:	
Name of New Registered Agent N/A	
(Florida stre	et address)
New Registered Office Address: (City)	Florida
(City)	(Zip Code)
,	
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w.	ith and accept the obligations of the position.
Signature of New Registered As	gent, 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 <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: X Change	<u>PT</u>	John Doe	
X Remove	<u>y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	ES	GUERLINE MEJIA	241 NE PRIMA VISTA BLV
Add			PORT ST LUCIE FL 3498
• Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		· ———	
Remove			

E. If amending or adding additional Article (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
N/A	(be specifie)
	a quadratura quadratur
. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

The date of each amendment(s) adoption: N/A	_, if other than the
date this document was signed.	
Effective date if applicable: N/A	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 04/29/2014	
Signature Teller Music	_
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
JULIO MEJIA	
(Typed or printed name of person signing)	_
PRESIDENT	
(Title of person signing)	_