100002046D

(Re	equestor's Name)
(Ad	ddress)
(Ad	ddress)
(Cit	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(D.	
	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:

Office Use Only



900239345829

11/05/12--01024--003 **52.50

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:

DOCUMENT NUMBER:

P1000020460

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

TOMAS Q MARKERO
Name of Contact Person
GOLD WING CARRIERS INC
Firm/ Company
4095 S EDGEWATER CIRCLE
Address
LABELLE FLORIDA 33995
City/ State and Zip Code
luzcallero@aol.com
F-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tom AS O MANGAO -

ymj.

305

218-0225

Area Code & 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

Certified Copy (Additional copy is enclosed) PAID 11/2/12 CK#8422

Mailing Address

Amendment Section
Division of Corporations
O.B. & & 327
Tallalfasses, FL 32314

12 NOV 20 AM 8:14

12 NOV 20 AM 8:14

12 NOV 20 AM 8:14

14 NOV 20 AM 8:14

15 NOV 20 AM 8:14

16 NOV 20 AM 8:14

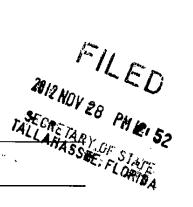
17 NOV 20 AM 8:14

18 NOV 20 AM

Street Address

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

Articles of Amendment to Articles of Incorporation



GOLD WING CARRIERS INC

(Name of Corporation as curre	ently filed with the	Florida Dept. of State)	ASS STA
P100000	20460		ASSE FLOR
(Document Nun	nber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this	Florida Profit Corporation ad	opts the following amendmen
A. If amending name, enter the new name of	the corporation:		
N/A			The new
name must be distinguishable and contain the "Corp.," "Inc" or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or	"Co". A professional corpora	rated" or the abbreviation. tion name must contain the
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>		N/A	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFIC</u>		N/A	
If amending the registered agent and/or r new registered agent and/or the new registered.	egistered office add	ress in Florida, enter the nam	e of the
•		<u>8:</u>	
Name of New Registered Agent	N/A		
	(Florida sti	reet address)	
New Registered Office Address:	(City)	, Florida	
	(City)		(Zip Code)
lew Registered Agent's Signature, if changin hereby accept the appointment as registered a	i <mark>g Registered Agent</mark> gent. I am familiar	: with and accept the obligations	of the position.
N/			•
	e of New 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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change		<u> </u>	
Add			
Remove			
4) Change	**		
Add			
Remove			
5) Change			<u></u>
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets. if necessary). (Be specific)
ARTICLE IV
TO BE DIVIDED EQUALING 50% EACH BETWEEN
PT - TOMAS Q MARRERO
VT - LUIS M BURON
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N.4)
N/A

The date of each amendment(s) add	option:NOVEMBER 2, 2012
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	oved 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 fo	or the amendment(s) was/were sufficient for approval
by	**
	(voting group)
action was not required.	oted by the board of directors without shareholder action and shareholder oted by the incorporators without shareholder action and shareholder
DatedNO	OV 2, 2012
Signature	4-1-
(By a dire selected,	ector, 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 diduciary by that fiduciary)
_	TOMAS O MARRERO
	(Typed or printed name of person signing)
	PRESIDENT
_	(Title of person signing)