Pluudoa 1691

(Re	questor's Name)	,
(Ad	dress)	
, (Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
•	siness Entity Nar	
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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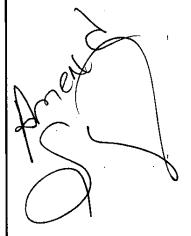
Office Use Only

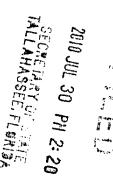
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COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF COR	PORATION:	Cessna Distributors, In	<u>C.</u>
DOCUMENT NU	JMBER:	P10000029691	
The enclosed Artic	cles of Amendment and	fee are submitted for filing.	
Please return all ca	orrespondence concernin	g this matter to the following:	
		Lawrence Cozzi	
		Name of Contact Person	
		Cessna Distributors, Inc.	
		Firm/ Company	
13		S Dixie Highway, Suite 114-403	
		Address	
		Miami, Florida 33176 City/ State and Zip Code	
		City/ State and Zip Code	
	E-mail address: (to b	e used for future annual report notification)	
For further inform	ation concerning this ma	tter, please call:	
	_awrence Cozzi	at (96-9923
Name	e of Contact Person	Area Code & Daytime Tel	ephone Number
Enclosed is a chec	k for the following amou	int made payable to the Florida Depart	tment 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 A		Street Address Amendment Section	

Division of Corporations

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

ASEC, FLORISA

Cessna Distributors, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P10000029691

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following

vord "corporation," "compar gnation "Corp," "Inc," or "Co	The injury," or "incorporated" or "incorporated" or "incorporated" or "injury".
onal association," or the abbre	viation "P.A."
le: DDRESS)	
1	· · · · · · · · · · · · · · · · · · ·
<u>OX</u>)	
,	<u> </u>
ered office address in Florida d office address:	, enter the name of the
	•
(Florida street address)	
	, Florida,
(City)	-(Zip Code)
	OX) ered office address in Floridad office address: (Florida street address)

		ctors, enter the title and name of each officers of each Officer and/or Director being added	
(Attach addi	tional sheets, if necessary)		
<u>Title</u>	Name	<u>Address</u>	Type of Action
CFO	Troy Acosta	13165 S. Dixie Highway. Suite 114-403 Miami, Florida 33176	☑ Add □ Remove
	ling or adding additional Iditional sheets, if necessar	Articles, enter change(s) here: y). (Be specific)	
provisio		exchange, reclassification, or cancellation of amendment if not contained in the amendme	
		-	1
			1

The date of each amendment	(s) adoption:
• •	(date of adoption is required)
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/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	e approved by the shareholders through voting groups. The following statemend 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/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated_07/2	7/2010
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court spirited fiduciars by that fiduciars)
арр	pinted fiduciary by that fiduciary)
	Lawrence Cozzi
	(Typed or printed name of person signing)
	Vice President / Secretary (Title of person signing)
	(Title of person signing)