P110000/8/935

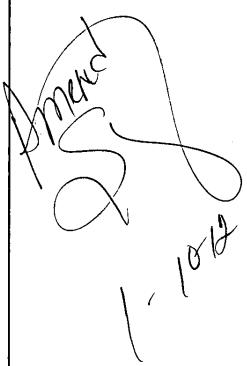
(Re	questor's Name)	-
(Ad	dress)	
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(Cit	y/State/Zip/Phone	· #)
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Nimda Avi	ation Inc.	
	BER: P1100001883		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Amnon Magid		
	•	Name of Contact Person	1
	Nimda Aviation Ir		
		Firm/ Company	
	1669 NW 144th 1		
		Address	
	Sunrise, FL 3332		
		City/ State and Zip Code	t
rse	ever@avion-syster		
 ,	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Amnon Mag	id	_{at (} 954	9905012
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy
	enclosed)	(Additional C	Ору
•			is enclosed)
Ma	iling Address	Street	Address
	nendment Section		iment Section
Div	ision of Corporations		on of Corporations
P.C	D. Box 6327	Clifton	Building
Tai	llahassee, FL 32314	2661 E	Executive Center Circle
		Tallah	assee, FL 32301

Articles of Amendment Articles of Incorporation of

AIZJAN 9 PMR: 47

Nimda Aviation Inc.

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

P11000018835

F11000010033					•
(Document Numb	per of Corporation (if	(nown)			
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this F	orida Profit Corpo	ration ado	pts the following	; amendment(s
A. If amending name, enter the new name of t	the corporation:				
					The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," or	Corp," "Inc," or "C	o". A professional			breviation
B. Enter new principal office address, if applic	cable:				
(Principal office address MUST BE A STREET					
					
C. Enter new mailing address, if applicable:					
(Malling address MAY BE A POST OFFICE	E BOX)				
		-			
D. If amending the registered agent and/or reg		s in Florida, enter	the name	of the	
new registered agent and/or the new registe	ered office address:				
Name of New Registered Agent					
	(Florida stree	t address)			
New Registered Office Address:			Florida		
	(City)			(Zip Code)	
			•		
Name Decisional Agantin Signature (Calcourte	. Danistanad Amanta				
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age	ent. I am familiar wi	h and accept the ob	ligations d	of the position.	
	•	•	5	•	
Standina	aCMan Danistanad As	and if alamaina			

Page 1 of 4

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>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
(1) Change Add Remove	P	Ronen Sever	7 Nachal Sorek Street Ramat-Hasharon 47202 Israel
2) Change Add Remove	<u>v</u>	Luke Wurms	Savelsbos 324 2716 HS zoetermeer The Netherlands
3) Change Add Remove			
4) Change Add Remove	WALLOW A		
5) Change Add Remove	-,, ,,,, ,,,,		
6) Change Add Remove			

If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)		
_		
	,	
_		
	1	
_		
_		
•		
ľ	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/A)	
	44.44.44.44.44.44.44.44.44.44.44.44.44.	
_		

The date of each amendment(s) adoption: 1/4/2012 Effective date if applicable: (no more than 90 days after amendment file date) Adoption of Amendment(s) (CHECK ONE) ■ The amendment(s) was/were 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 (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_ 1/4/2011 Signature (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) Ronen Sever (Typed or printed name of person signing) President

(Title of person signing)