## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN SOUTH FLORIDA AIR CHARTER CORP

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C. LEWIS AUG 2 7 2013

EXAMINER

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## **COVER LETTER**

TO:	Amendment Section
	Division of Corporations

Division of Corpor	anons		
NAME OF CORPORA	SOUTH FL R. P1100008289	ORIDA AIR CHA	ARTER CORP_
	Amendment and fee are su		
•	ondence concerning this ma		
·	Δ.	MAURI DE BARI	ROS :
-			
	SOUTH FL	Name of Contact Person ORIDA AIR CHA	
		Firm/ Company	
		14150 SW 129T	HSTREET
		Address	
		MIAMI, FL. 3318	36
***		City/ State and Zip Code	3
	ama	uridb@hotmail.c	om
		sed for future annual report	
For further information	concerning this matter, pleas	se call:	
AMAURI DE E	BARROS	<sub>at (</sub> 786	343-2509
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for t	the following amount made	payable to the Florida Depa	rtment 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)
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 lassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle issee, FL 32301

to

FILED

Articles of Amendment to Articles of Incorporation of 13 AUG 27 PM 3: 31

SECRETARY OF STATE TALLAHASSEE, FLORIDA

SOUTH FLORI	DA AIR CHARTER	CORP	- COMO
(Name of Corporation as currently file	ed with the Florida Dept. of Sta	nte)	-
P11	000082893		
(Document Number of C	Corporation (if known)		-
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Cor	poration adopts the followin	g amendment(s)
A. If amending name, enter the new name of the cor	poration:		49
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the a	" "Inc," or "Co". A profession	r "incorporated" or the a nal corporation name must	_The new bbrevlation contain the
B. Enter new principal office address, if applicable: (Principal office address MUST RE A STREET ADD	N/A		-
			<b>-</b>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	N/A		- -
D. If amending the registered agent and/or registered new registered agent and/or the new registered of New Registered Agent  N/A		ter the name of the	-
	(Florida street address)		
New Registered Office Address:	(City)	, Florida(Zip Code)	-
New Registered Agent's Signature, if changing Registered agent. I		obligations of the position.	
Signature of Nev	w 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:

3054768788

(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.

X Change	PT John	<u>Doe</u>	
X Remove	Y <u>Mike</u>	Jones	
_X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>VP</u>	JULIO CESAR MARTINEZ CARDENAS	8201 KIRKWOOD
X Add			TAMPA, FL. 33634
Remove			
2) Change	TR	YOEL SARDUY CARDENAS	6906 DIMARCO RD
X Add			TAMPA, FL. 33634
Remove			
3 ) Change	<u>VP</u>	MARIA HELENA S. BARROS	13953 SW 66 STREET
Add			APT. 607-B
X Remove			MIAMI, FL 33183
4) Change	SEC	MARIA HELENA S. BARROS	13953 SW 66 STREET
X Add			APT. 607-B
Remove			MIAMI, FL 33183
5) Change			
Add	<del></del>		
Remove			
6) Change			
Add			
Remove			

<ol> <li>If amending or adding additional Article (Attach additional sheets, if necessary).</li> </ol>	(Be specific)
N/A	
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,	
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
<u>provisions for implementing the ame</u> (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
N/A	
,	

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13 AUG 27 PM 3: 31 08/19/2013 The date of each amendment(s) adoption: date this document was signed. 08/19/2013 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 east 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. Signature resident or other officer - if directors or officers have not been an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) AMAURI DE BARROS (Typed or printed name of person signing) PRESIDENT (Title of person signing)