

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H12000143492 3)))



H120001434923ABC-

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To: Division of Corporations
Fax Number : (850) 617-6380.

From: Account Name : MARTIN ACCOUNTING & TAX SERVICE, INC
Account Number : I20060000012
Phone : (305) 826-5886
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
CAMI WINGS AIRWAYS, INC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

*Amend
@ 4/4/12*



June 1, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CAMIWINGS AIRWAYS, INC
1561 ESTANCIA CR
WESTON, FL 33327US

SUBJECT: CAMIWINGS AIRWAYS, INC
REF: P11000105262

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The last page is missing.

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Irene Albritton
Regulatory Specialist II

FAX Aud. #: H12000143492
Letter Number: 012A00015753

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2012 JUN - 1 AM 10:31
NOT RETURNED
TO AGENCY OF ORIGIN
SUFFICIENCY OF FILING

Articles of Amendment
to
Articles of Incorporation
of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JUN -1 AM 9:25

CAMIWINGS AIRWAYS, INC

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

P11000105262

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

883 SAN REMO DR
WESTON, FL 33326

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

883 SAN REMO DR
WESTON, FL 33326

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

TORRES-MONCADA, DAVID
883 SAN REMO DR

(Florida street address)

New Registered Office Address:

WESTON

(City)

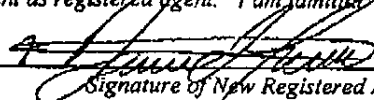
Florida

33326

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


Signature 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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>PDT</u>	<u>SANIN, MARIA C</u>	<u>1551 ESTANCIA CR</u> <u>WESTON, FL 33327 US</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>PDT</u>	<u>TORRES- MONCADA, DAVID</u>	<u>883 SAN REMO DR</u> <u>WESTON, FL 33328</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>

[illegible][illegible]

The date of each amendment(s) adoption: 05/31/2012

Effective date if applicable: 05/31/2012

(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 05/31/2012

Signature X

(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)

DAVID TORRES-MONCADA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)