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TO: Amendment Section Division of Corporations NAME OF CORPORATION: Click Air USA Corp DOCUMENT NUMBER: P12000091504 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Giselle Guzman Name of Contact Person Monique Troncone, CPA P.A. Firm/ Company 55 NE 5Th Avenue, Suite 501 Address Boca Raton, FL 33432-4093 City/ State and Zip Code giselle@troncone-cpa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561) 417-0308

Area Code & Daytime Telephone Number Giselle Guzman Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$52.50 Filing Fee □ \$35 Filing Fee **■\$43.75** Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

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

Articles of Amendment to Articles of Incorporation of

FILE D 15 APR 28 AH II: 31

	All refer to the first terms of the second
(Name of Corporation as current	lly filed with the Florida DeptAofiState SSEE, FLORIDA
P120000915	504
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corporation:	
ATAI LA INC	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	600 Brickell Avenue, Suite 1618
Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33131
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
new registered agent and/or the new registered other address	18 <u>5.</u>
Name of New Registered Agent	
(Florida s	treet address)
•	,
New Registered Office Address:	, Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	<u>it:</u>
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: X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jor	nes	
X Add	<u>sv</u>	Sally Sm	<u>uith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add		-		
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

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/A)	Attach additional	dding additional Art sheets, if necessary).	(Be specific)			
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(if not applicable, indicate N/A)	provisions for i	mplementing the amo	endment if not cor	ntained in the an	nendment itself:	-
	(if not appli	cable, indicate N/A)				
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04/16/2015	
The date of each amendment(s) adoption:	, if other than the
ate this document was signed.	
04/16/2015	
ffective date if applicable:	
(no more than 90 days a	ifier amendment file date)
Tote: If the date inserted in this block does not meet the applicable state ocument's effective date on the Department of State's records.	itutory filing requirements, this date will not be listed as th
doption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The numbe by the shareholders was/were sufficient for approval.	r of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through vot must be separately provided for each voting group entitled to vote sep	
"The number of votes cast for the amendment(s) was/were suffic	
by	,,
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without action was not required. ☐ The amendment(s) was/were adopted by the incorporators without shared the control of the	
action was not required.	
04/16/2015	
Dated	<u>}</u>
(By a director, president or other officer if selected, by an incorporator if in the rands appointed fiduciary by that fiduciary)	directors or officers have not been off receiver, trustee, or other court
Monique Troncone, C	PA
(Typed or printed name of	f person signing)
SEC	
(Title of perso	on signing)