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(Address)				
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SECRETARY OF STATE
TAIN ANASSEE FEORIDA

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SILVER EA		I, CORP
DOCUMENT NUMBER: P130000340	7	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Claudia Escobar		
	Name of Contact Person	1
CBS Financial		
	Firm/ Company	
6209 W Commer	cial Blvd	
	Address	
Tamarac, FL 333	19	
	City/ State and Zip Cod	e
claudia@cbsfinancia	lcpa.com	
E-mail address: (to be us	ed for future annual report	notification)
For further information concerning this matter, pleas	e call:	
Claudia Escobar	at (954	, 724-4141
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	irtment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment

to

FILED

Articles of Incorporation of

MAY 10 PM 4:38

SILVER EAGLE AVIATION, CORP	SECRETARY OF STATE
(Name of Corporation as currently filed with the Flo	orida DEALED HASSEE, ELORIDA
P13000003407	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cword "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the A.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A
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 office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent N/A	
(Florida stree	et address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	
Signature of New Registered Ag	gent, 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> <u>Joh</u>	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	<u>VP</u>	Jeff Driskill	230 E. 52nd. St., Apt 3 D
Add			New York, NY 10022
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			Manage of Management 2
5) Change			
Add			
Remove			
6) Change			
-			
Add			
Remove			

. If amending or adding additional Arti	icles, enter change(s) here:
(Attach additional sheets, if necessary).	(Be specific)
N/A	
The state of the s	
**	
7-114	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
I/A	

The date of each amendment(s) adoption:	SILVER	EAGLE AVIATION, CORP
	P13000		
		(no more l)	han 90 days after amendment file date)
Adoption of Amendment(s)	Q	CHECK ONE)	ı
The amendment(s) was/were by the shareholders was/were			The number of votes cast for the amendment(s)
The emerdment(x) westwere nuist be separately provided	approved by for each von	the shareholden ng group entitle	is through voting groups. The following statement is d to vote separately on the amendment(2):
"The number of votes c	est for the en	sendment(s) we	nature or approval
by was more and a second and con-		voung group)	n
The amendment(s) was/were action was not required.	adopted by ti	he board of dire	ctors without shareholder action and shareholder
☐ The emendment(s) wastwere ection was not required.	adopted by t	he incorporatora /	s without shareholder action and shareholder
Defed May	03, 201	3///	
sele	cted, by an in		cofficer - if directors or officers have not been in the hands of a receiver, trustee, or other court inty)
	Matia	s L Panta	programme status in the contract of the contra
			nted name of person signing)
	PTD	PRESI	1 × N ▼
		(Title of pe	erson signing)