## P13000020801

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Amend Jan.17,13

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: RIVERDALI	E AVIATION CO	DRP		
DOCUMENT NUMBE	<sub>CR:</sub> P1300002080	1			
	The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:					
L	LEONARDO LEPIANE				
	Name of Contact Person				
	Firm/ Company				
	555 NE 34 ST #1107				
N	Address MIAMI FL 33137				
	City/ State and Zip Code				
LLE	PIANE@GMAIL.0				
	E-mail address: (to be use	ed for future annual report	notification)		
For further information of	concerning this matter, please	e call:			
LEONARDO LEPIANE at (305 ) 301-7180					
Name of	Contact Person	Area Coo	le & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department 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)		
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

## RIVERDALE AVIATION CORP.

RIVERDALE AVIATION CORP				_
(Name of Corporation as currently P13000020801	<u>filed with the Flor</u>	ida Dept. of State)		
(Document Number of	of Corporation (if kr	nown)		-
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:			adopts the followin	g amendment(s) to
A. If amending name, enter the new name of the	corporation:			
				_The new
name must be distinguishable and contain the we "Corp.," "Inc.," or Co.," or the designation "Cor word "chartered," "professional association," or th	rp," "Inc," or "Co	". A professional corpe		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)				-
				- - 1.0
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B				3
	-			13 11 15 11 11 22
D. If amending the registered agent and/or regist new registered agent and/or the new registered		in Florida, enter the n	ame of the	1.22
Name of New Registered Agent			_	
	(Florida street	address)		
New Registered Office Address:	(City)	, Florid	da(Zip Code)	-
	(Chy)		(Zip Code)	
New Registered Agent's Signature, if changing Ro	egistered Agent:			
I hereby accept the appointment as registered agent.		and accept the obligati	ons 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.

X Change	PT	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	WALTER F EMMA	555 NE 34 ST #1107
Add			MIAMI FL 33137
X Remove			
2) Change	Р	ROBERTO VEZZINI Y GALARRAGA	555 NE 34 ST #1107
X Add			MIAMI FL 33137
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
	<del></del> · · · · · · · · · · · · · · · · · ·
	<del>- · · · · · · · · · · · · · · · · · · ·</del>
rovisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and in the amendment itself:
(if not applicable, indicate N/A)	
·	

The date of each amendment(s) acd this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	proved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	7/12/13	
Signature	Malle ~	
(By a d	rector, president of other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	WALTER F EMMA	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	

(Title of person signing)