P/300035/45

| (Requestor's Name) |
|---|
| (Address) |
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| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: WINGS I | NTEGRATED | LOGISTICS |
|--|--|---|
| DOCUMENT NUMBER: P13000035 | | |
| The enclosed Articles of Amendment and fee are su | bmitted for filing. | |
| Please return all correspondence concerning this ma | itter to the following: | |
| MARGIE NAV | ARRO | |
| WINGS INTEG | Name of Contact Person | • |
| 9805 NW 45TH | Firm/ Company H LANE | |
| DORAL, FL 33 | Address 8178 | |
| MNAVARRO@W E-mail address: (to be us | City/ State and Zip Cod INGS-IL.COM sed for future annual report | |
| For further information concerning this matter, pleas | se call: | · |
| MARGIE NAVARRO | _{at (} 786 | _,4316572 |
| Name of Contact Person | | de & Daytime Telephone Number |
| Enclosed is a check for the following amount made | payable to the Florida Depa | artment of State: |
| \$35 Filing Fee \$\times \text{Certificate of Status}\$ | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐S52.50 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 | Ameno Divisio Clifton 2661 E | Address Iment Section on of Corporations Building Executive Center Circle USSEE, FL 32301 |

Articles of Amendment Articles of Incorporation

WINGS INTEGRATED LOGISTICS INC.

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

P13000035145

(Document Number of Corporation (if known)

| I/A | |
|---|--|
| | |
| me must be distinguishable and contain the v Corp.," "Inc.," or Co.," or the designation "Co ord "chartered," "professional association," or | ord "corporation," "company," or "incorporated" or the a rp," "Inc," or "Co". A professional corporation name must the abbreviation "P.A." |
| Enter new principal office address, if applica Frincipal office address <u>MUST BE A STREET A</u> | N/A |
| | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE | N/A |
| | N/A |
| (Mailing address MAY BE A POST OFFICE If amending the registered agent and/or registered agent | tered office address in Florida, enter the name of the |
| (Mailing address MAY BE A POST OFFICE If amending the registered agent and/or reginew registered agent and/or the new registered.) | tered office address in Florida, enter the name of the |
| (Mailing address MAY BE A POST OFFICE If amending the registered agent and/or regi | tered office address in Florida, enter the name of the |
| [f amending the registered agent and/or reginew registered agent and/or the new registered. | tered office address in Florida, enter the name of the |
| (Mailing address MAY BE A POST OFFICE If amending the registered agent and/or reginew registered agent and/or the new registered. NIA | tered office address in Florida, enter the name of the |
| (Mailing address MAY BE A POST OFFICE If amending the registered agent and/or reginew registered agent and/or the new registered. NIA | stered office address in Florida, enter the name of the ed office address: |

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 | <u>PT</u> <u>John</u> | <u>1 Doe</u> | |
|----------------------------|-----------------------|----------------|-------------------|
| X Remove | <u>V</u> <u>Mik</u> | e Jones | |
| X Add | SV Sall | y Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| 1) X Change | Р | MARGIE NAVARRO | 9805 NW 45th LANE |
| Add | | | DORAL, FL 33178 |
| Remove | | | |
| 2) X Change | VP | SILVANA KORIN | 9805 NW 45th LANE |
| Add | | | DORAL,FL 33178 |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | ** | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| | f necessary). (Be sp | ecgicj | | |
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| If an amendment provide provisions for implemen (if not applicable, ina | ting the amendment | eclassification, or ca if not contained in | incellation of issued s the amendment itself | <u>hares,</u> E |
| I/A | | | | |
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| he date of each amendment(s) adoption: 04/23/2013 |
|--|
| ffective date if applicable: 04/23/2013 |
| (no more than 90 days after amendment file date) |
| |
| doption 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 04/23/2013 |
| Signature |
| (By a director, president or 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) |
| MARGIE NAVARRO |
| (Typed or printed name of person signing) |
| PRESIDENT |
| (Title of person signing) |