P13000039890

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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

CL-7-15

COVER LETTER

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: E-ALERT, CORP					
DOCUMENT NUMBER: P130000398	890				
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
. Alan Anderson					
 	Name of Contact Person	1			
Royal Atlantic E-Commerce, LLC					
	Firm/ Company				
411 Walnut Str	eet, #4495				
	Address				
Green Cove Sp	orings, FL 32043	•			
	City/ State and Zip Code	2			
alan@raecomm.co	ım				
	e used for future annual report	notification)			
	· · · · · · · · · ·	,			
For further information concerning this matter, please call:					
Alan Anderson	at (904	, 607-5085			
Name of Contact Person	Area Coo	de & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee Certificate of Status	_	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address	Street A	Street Address			
Amendment Section	Amend	Amendment Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



E-ALERT, CORP

14 DEC 30 AM 7: 27

(Name of Corporation as	s currently filed with the Fl	orida Dent. of State)	IN DEC 0	
P13000039890		,		
	nt Number of Corporation (if	known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit Corporation ado	pts the following a	mendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
AIRCRAFT MODIFICAT	IONS, INC.		T	he new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	Co". A professional corporati	ated" or the abbi	eviation
R Finter new principal office address	if applicable	N/A		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		
		· · · · · · · · · · · · · · · · · · ·		
D. If amending the registered agent an			of the	
new registered agent and/or the new				
Name of New Registered Agent	N/A			
	(Florida stre	et address)		•
New Registered Office Address:	N/A	, Florida		
	(City)		(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agent:			
I hereby accept the appointment as regist		ith and accept the obligations o	of the position.	
Si	gnature of New Registered A	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 <math>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>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change			N/A	
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		· 		
Add				
Remove				

J. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	
	· · · · · · · · · · · · · · · · · · ·
. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

The date of each amendment(s) adoption: N/A	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS	, if other than the
date this document was signed.	•	
Effective date if applicable: N/A	14 DEC 30 AM 7: 27	<u></u>
(no mo	ore than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK O	<u>NE</u>)	
The amendment(s) was/were adopted by the sharehol by the shareholders was/were sufficient for approval.	ders. The number of votes cast for the amendment(s)	
The amendment(s) was/were approved by the shareho must be separately provided for each voting group e	olders through voting groups. The following statement ntitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
_{by} N/A		
(voting grou	(p)	
The amendment(s) was/were adopted by the board of action was not required.	directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the incorpor action was not required.	ators without shareholder action and shareholder	
Dated 12/26/2014	_	
Signature		
(By a director, president or	other officer – if directors or officers have not been	
selected, by an incorporator appointed fiduciary by that	- if in the hands of a receiver, trustee, or other court fiduciary)	
Alan Anderson		
т)	yped or printed name of person signing)	
President		
	(Title of person signing)	