P13000040648

(Daniel J. N)
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COVER LETTER

Division of Corporations NAME OF CORPORATION: AIRTRANS PACKAGING CORP. DOCUMENT NUMBER: P13000040698 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DENNIS MAURICIO MERAZ Name of Contact Person AIRTRANS PACKAGING CORP. Firm/ Company **7900 NW 53RD COURT** Address LAUDERHILL, FLORIDA 33351-5076 City/ State and Zip Code DENNIS.MERAZ@AIRTRANSPACKAGING.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **DENNIS MERAZ** Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State:

Mailing Address

\$35 Filing Fee

TO: Amendment Section

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

□\$43.75 Filing Fee &

Certificate of Status

Street Address

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(Additional copy is

Certified Copy

enclosed)

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

□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status



Articles of Amendment to Articles of Incorporation of

P1300040698 (Document Number of Corporation (if k			
(Document Number of Corporation (if k			
•	nown)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Statutes, the statutes of	orida Profit Corporation ac	lopts the follow	ing amendment(s) to
A. If amending name, enter the new name of the corporation:			
			The new
name must he distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Covord "chartered," "professional association," or the abbreviation "P.	o". A professional corpora		
	л.		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			<u> </u>
			_
C. Enter new mailing address, if applicable:			7.0
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			-£65 3
			新 野 野
		· · · · · · · · · · · · · · · · · · ·	SSE -
D. If amending the registered agent and/or registered office addres	s in Florida, enter the nan	ne of the	P-6 PH L: 13 P-6 PH L: 13 P-8 PH L: 13 PASSEE FLORID
new registered agent and/or the new registered office address:			STA FF
Name of New Registered Agent			BA IS
(Florida street	t address)		
New Registered Office Address:	, Florida		
(City)		(Zip Code)	

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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	D	GALILEO VEROY ESPINOZA	19390 NW 87 PL
X Add			HIALEAH, FLORIDA
Remove			33018
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
					=110 10 10 10 11
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				<u>.</u>	
	 				
			<u></u>		
	 			<u>,</u>	
			<u> </u>		
					
 					
	mendment provides for an sions for implementing the frost applicable, indicate N/2	exchange, reclassi amendment if not A)	fication, or cancelle contained in the an	ation of issued share nendment itself:	<u>s,</u>
If an a provis (<i>ij</i>	j noi applicable, indicale 1977				
If an a provis (j)	ј пог аррисавіе, іпаксите 1977				
If an a provis (i)	ј пог аррисавіе, іпаксие 1977				
If an a provis (i)	ј пог аррисавте, таксите 1977				
If an a	ј пог аррисавте, таксите 1977				
If an a	ј пог аррисавте, таксите 1977				
If an a	ј пог аррисавте, таксите 1977				

The date of each amendment(s) adoption:	_, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	_
Adoption 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)	
(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 AUGUS 1/24, 201/3	
Signature AMATO TOO TOLA	_
By a director, president or other 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)—	
DENNIS MAURICIO MERAZ M.	_
(Typed of printed name of person signing)	
/ PRESIDENT	_
(Title of person signing)	