## P13000073000

(Re	equestor's Name)	<del></del>
, (Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	<del>e #)</del>
PICK-UP	MAIT	MAIL
(Ві	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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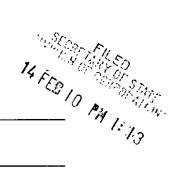
Amend Name cho 10 2.12.14

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	AvWor	ks Aviation Corp.		
DOCUMENT NUMBER:	P13000073660			
The enclosed Articles of Amend	ment and fee are su	bmitted for filing.		
Please return all correspondence	concerning this ma	tter to the following:		
	D	ror Svorai		
	AvWor	Name of Contact Person ks Aviation Corp.	1	
	3901 SW	Firm/ Company 47th Avenue, Suite	415	
<del> </del>	Davie	Address e, Florida 33314		
		City/ State and Zip Code	e	
	Dror@v	aporgroup.com		
E-ma	il address: (to be u	sed for future annual report	notification)	
For further information concerning	ng this matter, pleas	se call:		
Dror Svorai		954 at (	383-0734	
Name of Contact	Person	<del></del>	de & Daytime Telephone Number	
Enclosed is a check for the follow	ving amount made	payable to the Florida Depa	artment of State:	
_	3.75 Filing Fee & tifficate 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 Addr Amendment So Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

## **Articles of Amendment Articles of Incorporation** of AvWorks Aviation Corp.



## (Name of Corporation as currently filed with the Florida Dept. of State) P13000073660

nt(s) to

(Docume	nt Number of Corporation (if	known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this <b>F</b>	lorida Profit Corporation	adopts the following amendm
A. If amending name, enter the new na	ame of the corporation: Vapor Group, Inc.		The ne
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	o". A professional corp P.A."	rporated" or the abbreviatio oration name must contain th
B. Enter new principal office address,	if annlicable:	3901 SW 47th Av	enue
(Principal office address MUST BE A S		Suite 415	
		Davie, Florida 333	314
<ul> <li>C. Enter new mailing address, if applications (Mailing address MAY BE A POST)</li> <li>D. If amending the registered agent an new registered agent and/or the new registered agent an</li></ul>	OFFICE BOX)  nd/or registered office addre	ss in Florida, enter the n	name of the
Name of New Registered Agent			
	3901 SW 47th Avenu	e, Suite 415	•
	(Florida stree	et address)	<del></del>
New Registered Office Address:	Davie	. Flori	33314
	(City)		(Zip Code)
New Registered Agent's Signature, if continued the second state of the second s		ith and accept the obligati	ions of the position.
Si	gnature of New Registered Ag	ent, if hanging	<del></del>

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>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	se Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PSD	Joe Eccles	10778 NW 53rd Street
Add			Sunrise, Florida 33351
Remove			
2) Change	PTD	Dror Svorai	3901 SW 47th Avenue
Add			Suite 415
Remove			Davie, Florida 33314
3) Change	VSD	Yaniv Nahon	3901 SW 47th Avenue
Add			Suite 415
Remove			Davie, Florida 33314
4) Change	CFO, I	Jorge Schcolnik	3901 SW 47th Avenue
Add			Suite 415
Remove			Davie, Florida 33314
5) Change			
Add	<del></del>		
Remove			
6) Change	·		
Add			
Remove			

If amending or adding additional Artic (Attach additional sheets, if necessary).  /A	(Be specific)
If an amendment provides for an exchaprovisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and and an and an and an analysis and analysis and an analysis analysis and an analysis and analysis analysis and an analysis a
(if not applicable, indicate N/A)	
/A	

The date of each amendment	January 27, 2014	, if other than the
date this document was signed.	• • • • • • • • • • • • • • • • • • • •	, ii other than the
Effective date if applicable:	January 27, 2014	
in application	(no more than 90 days after amendment file date)	<u> </u>
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/wer- action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer- action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Fet Dated	oruary 4, 2014	
Signature		
(B) se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	_
	Dror Svorai	
	(Typed or printed name of person signing)	_
	President, Director	
	(Title of person signing)	_