Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000049283 3)))



H180000492833ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : DAVID TORCHIN, C.P.A., P.A.

Account Number : I19990000007 Phone : (954)323-6300

Fax Number : (954)323-6301

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

| Enail | Address: | : | | |
|-------|----------|---|--|--|
| | | | | |

COR AMND/RESTATE/CORRECT OR O/D RESIGN AIRCRAFT TITLE & TRUSTEE, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$35.00 |

FEB 2 6 2016

C LEWIS

Electronic Filing Menu

Corporate Filing Menu

Help

| Feb | 25 | 2016 | 03:04PM | CPA | Office | 954323630 |
|-----|----|------|---------|-----|--------|-----------|
|-----|----|------|---------|-----|--------|-----------|

page 2

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

Articles of Amendment to Articles of Incorporation of 16 FEB 25 AM 8: 10

| | of | | |
|--|---|---|----------|
| | Aircrast Title & Trustee, Inc. | | |
| (Name of Corpor | ation as currently filed with the Flo | rida Dept, of State) | |
| | P16000003428 | | |
| (Doc | curnent Number of Corporation (if kn | own) | |
| Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation: | rida Statutes, this Florida Profts Corp | poration adopts the following amendmen | rt(s) to |
| A. If amending name, enter the new name of the | corporation: | | |
| name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered." "professional association." or t | orp," "Inc," or "Co". A profession | The new "incorporated" or the abbreviation al corporation name must contain the | |
| B. <u>Enter new principal office address, if applica</u> (Principal office address <u>MUST BE A STREET A</u> | ble: DDRESS) | | |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE</u>) | <i>BOX</i>) | | |
| D. If amending the registered agent and/or register new registered agent and/or the new register | stered office address in Florida, ent ed office address: | er the name of the | |
| Name of New Registered Agent | | <u> </u> | |
| | (Florida street address) | | |
| New Registered Office Address: | | , Florida | |
| | (Cty) | (Zip Code) | |
| New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen | Registered Agent: a. I am familiar with and accept the | obligations of the position. | |
| | ignature of New Registered Agent, if t | 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 | <u>PT</u> | John Dog | |
|-------------------------------|-----------|-------------------------|----------------------|
| X Remove | | | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | Name | Address |
| l) Change | VP | Joanne C Genovese Lares | 15032 SW 36th Street |
| Add | | | Davie, Fl 33331 |
| X Remove | | | |
| 2) Change | | | |
| Add | ٠ | | <u>:</u> |
| Remove | | , | |
| 3)Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | · |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| | (Be specific) | | |
|---|----------------------------------|---|--------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| _ : | | | |
| | | | |
| | | ······································ | |
| | | | |
| | | <u> </u> | |
| | | | _ |
| | | | |
| | | | |
| | | | |
| | | | |
| <u> </u> | | | <u>-</u> |
| · | | | |
| on smandment provides for an av- | chaure, reclassification, or can | ncellation of issued shares, the amendment itself: | |
| rovisions for implementing the am (if not applicable, indicate N/A) | ienament il not contrined in t | | |
| rovisions for implementing the am | Rendiment it not contained in t | | |
| rovisions for implementing the am | Rendiment II not contained in t | | |
| rovisions for implementing the am | endment if not contained in t | | |
| rovisions for implementing the am | Rendment II not contained in t | | |
| rovisions for implementing the am | Rendiment II not contained in t | | |
| rovisions for implementing the am | Rendment II not companied in t | | |

| Feb | 25 | 2016 | D3:DAPM | CPA | Office | 9543236301 |
|-----|----|------|----------|-----|--------|------------|
| LED | 23 | 2010 | U3.U4F11 | CEM | | 9343230301 |

page 5 16 FEB 25 AH 8: 10 The tale of each amendment(f) adoption: if other than the date this doctument was signed Execute date it applicable. (narrore than 30 days after amendment fle date) Plate: If the date first the block does not meet the applicable statutory filing requirements, this date will not be hated as the dominants effective date on the Dapartment of State's records. CHECK ONE Adoption of Amendment(s) The monarchings was were adopted by the charefulders. The minute of votes cost for the amendment(s) by the charefulders was were sufficiently or suppreval. The amendment(s) was were approved by the shareholders through youngs, The following statement must be separately provided for each voting group suitifed to vote separately on the amendment(s): "The purpose of vores cast for the amendment(s) was/were sufficient for approval (voting group) El The amendment(s) was were adopted by the board of directors without shareholder sodion and shareholder sodion was not required. The amendine of the state state and placed by the decorporators without shareholder and shareholder worken hills not redniced. Dated Signaturi (By a director, president of other officer - if directors or officers have not been selected by at incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Page 4 of 4

(Title of person signing)

Additions Lace (Fyged or printed name of person signing)