P16000010721

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SECRETARY OF STATE
JIVISION OF CONFORATION

SEP 8 2016 C LEWIS

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: _ JET SET EXECUTIVE DUTY-FREE CORP **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **OLGA MELO** Name of Contact Person A-AMERICAN FINANCIAL SERVICES Firm/ Company 2761 SW 152 COURT Address MIAMI, FL 33185 City/ State and Zip Code AAMERICANFINANCIALSVC@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 9921879
Area Code & Daytime Telephone Number **OLGA MELO** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

JET SET EXECUTIVE DUTY-FREE CORP

2018 AUG 24 PM 4: 10

P16000010721 (Document Number of Corpora Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida I</i> its Articles of Incorporation:	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> 1	
	profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "con "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A word "chartered," "professional association," or the abbreviation "P.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)	
D. If amending the registered agent and/or registered office address in Fl new registered agent and/or the new registered office address:	<u> </u>
Name of New Registered Agent	
(Florida street addres	is)
New Registered Office Address:	. Florida
(City)	(Zip Code)

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	P	RINO FABRIZIO	5360 NW 20 TERRACE
Add			UNIT 204
Remove			FT. LAUDERDALE, FL 33309
2) X Change	VP	ANDREINA MOLERO	5360 NW 20 TERRACE
Add		•	UNIT 204
Remove			FT. LAUDERDALE, FL 33309
$\frac{X}{X}$ Change	S/T	CARLOS A. RUIZ	5360 NW 20 TERRACE
Add			UNIT 204
Remove			FT. LAUDERDALE, FL 33309
4) Change	VP	BETRZAIDA J. SANCHEZ	3131 NW 125 AVE
Add			SUNRISE, FL 33323
X Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			•

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
•	
f an amendment provides for an exch	hange, 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)	

The date of each amendment(s) adoption:	if cathor the	hi.
date this document was signed.	TIVISION OF CO	WE STATE
JULY 1, 2016	2016 AUG O.	ти опанцар
Effective date if applicable: (no more than 90 days after amendment file date)	2016 AUG 24	PH 4: 10
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	I not be listed as	the
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.		
7/1/16 Dated		
Signature Ancheing Tolero		
(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)		
ANDREINA MOLERO		
(Typed or printed name of person signing)		
VICE PRESIDENT		
(Title of person signing)		