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R. WHITE

APR 26 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Air International A	viation Corp	
DOCUMENT NUMB	P18000034110		· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Armin Altarac		
-		Name of Contact Person	1
-		Firm/ Company	
!	6303 Blue Lagoon Drive Ste	400	
-	 	Address	<u></u>
<u>.</u>	Miami, FL. 33126		
		City/ State and Zip Code	e
armina	altarac@hotmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
Armin Altarac		at (2080903
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate 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)
Amer Divis P.O.	ing Address Indment Section Identification of Corporations Box 6327 Indexee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

FILED

18 APR 25 PH 1: 15

SECRETARY PRISTATE TALLAHASDEE FLORIDA

Articles of Amendment to Articles of Incorporation of

(<u>Name</u>	of Corporation as current	y filed with the Florida D	ept. of State)
P18000034110			
	(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607 ts Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation	adopts the following amendment(
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associd	nation "Corp," "Inc," or	Co". A professional corp	rporated" or the abbreviation
3. Enter new principal office address,	if annlicable:	N/A	
Principal office address <u>MUST BE A S</u>			
			
C. Enter new mailing address, if appl	icable:	37/4	
(Mailing address <u>MAY BE A POST</u>		N/A 	

 If amending the registered agent ar new registered agent and/or the ne 			name of the
	N/A	-	
Name of New Registered Agent			
	(Elasida et	and a distance \	
	N/A	eet address)	
New Registered Office Address:	N/A	(Cit.)	, Florida
		(City)	(Zip Code)
lew Registered Agent's Signature, if c	hanging Registered Agent		
hereby accept the appointment as regist			ons of the position.
	Cr. CAL E	egistered Agent, if changin	

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>Jol</u>	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)Change	VP	GERMAN GOMEZ	6303 Blue Lagoon Dr. Ste 400
Add			Miami, FL. 33126
X Remove			
2) Change	VP	GERMAN MARCANO	6303 Blue Lagoon Dr. Ste 400
X Add			Miami, FL. 33126
Remove			
3) Change			_ _
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
	····
	· · · · · · · · · · · · · · · · · · ·
F. If an amendment provides for an exchange, reclassification, or cancellation of issued provisions for implementing the amendment if not contained in the amendment itself (if not applicable, indicate N/A)	shares.
N/A	
•	

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	te will 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 stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required.	r
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
04/19/2018	
Dated Signature	
(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)	•
Armin Altarac	
(Typed or printed name of person signing)	
Vice-President	
(Title of person signing)	