P94000081808

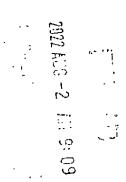
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June Chang

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MB CELLULAR,	INC.				
	BER: P94000081808					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	Scott R. Austin					
		Name of Contact Person	n			
VLP Law Group LLP						
		Firm/ Company				
	101 NE 3RD AVE, STE 1500	0				
		Address	- · · - · · · · · · · · · · · · · · · ·			
	Fort Lauderdale, FL 33301					
		City/ State and Zip Code	e			
	saustin@vlplawgroup.com					
	E-mail address: (to be us	sed for future annual report	notification)			
	on concerning this matter, pleas	se call:	207-2744	2022 AUG -		
Scott R. Austin, Esq.		at (- 5		
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	ب		
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	<u></u>		
Am Div P.O	iling Address endment Section ision of Corporations Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations centre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

Articles of Amendment to Articles of Incorporation of

MB CELLULAR, INC.				
(Name of Corporation as current	tly filed with the Florida Dept. of State)			
P94000081808				
(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607,1006. Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the follo	wing amendment(s) to		
A. If amending name, enter the new name of the corporation:				
MBAIRLINES, INC.		The new		
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must co	iation "Corp.,"		
B. Enter new principal office address, if applicable:	1100 LEE WAGENER BLVD			
(Principal office address MUST BE A STREET ADDRESS)	SUITE 210			
	FORT LAUDERDALE, FL 33315			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1100 LEE WAGENER BLVD	200		
	SUITE 210			
	FORT LAUDERDALE, FL 33315			
D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address		7 00 00		
Name of New Registered Agent				
(Elemi Le	treet address)	<u> </u>		
	rrect dan essy			
New Registered Office Address:	, Florida (City)	Zip Code)		
	(, , , , , , , , , , , , , , , , , , ,		
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	d: with and accept the obligations of the positi	on.		
Signature of New 1	Registered Agent, if changing			

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
б) Change		_		
Add				
Remove				

\tta	nending or adding additi ch additional sheets, if neo	cessary). (Be sp	ecific)			
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ar	amendment provides fo	r an exchange, re	classification,	or cancellation of	of issued shares,	
) F (visions for implementing (if not applicable, indicate	2 the amendment to N/A)	ti not containe	a in the amenai	nent i <u>tsen:</u>	
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The date of each amendment(s) adoption:	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 will not be document's effective date on the Department of State's records.	e listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareh action was not required.	older
■ The amendment(s) was/were adopted by the shareholders. The number of votes east 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)	
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) Michael J. Butler (Typed or printed name of person signing)	
· · · · · · · · · · · · · · · · · · ·	
President	

(Title of person signing)