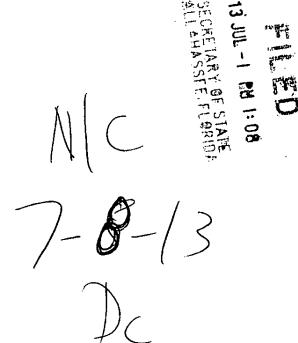
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Office Use Only



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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: AEROCARGO, INC. DOCUMENT NUMBER: P97000044859 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Steven Taliman Name of Contact Person **AEROCARGO INC** Firm/ Company POB 523474 Address Miami, FL 33152-3474 City/ State and Zip Code clutch@aerocargo.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) Area Code & Daytime Telephone Number Steven Tallman 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

AEROCARGO,INC.				
(Name of Corporation as currently filed v	with the Florida Dept. of State)			
P97000044859				
(Document Number of Corp	poration (if known)			
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tutes, this <i>Florida Profit Corporation</i> ado	pts the following	amen	dment(s) to
A. If amending name, enter the new name of the corpor	ration:			
AEROCARGO INC			The	new
name must be distinguishable and contain the word "c "Corp.," "Inc.," or Co.," or the designation "Corp," "I word "chartered," "professional association," or the abbr	Inc," or "Co". A professional corporati	ated" or the ab	brevia	ition
B. Enter new principal office address, if applicable:	NA			
(Principal office address <u>MUST BE A STREET ADDRES</u>	(22	ومن أطلق	_	
			<u> </u>	
				10
C. Enter new mailing address, if applicable:	NA	A R	-	enteres States
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		— <u>П</u>		774
				O
			80	
D. If amending the registered agent and/or registered o	office address in Florida, enter the name	e of the		
new registered agent and/or the new registered offic	ce address:			
Name of New Registered Agent NA	<u> </u>			
	(Florida street address)			
New Registered Office Address:	, Florida			
	(City)	(Zip Code)		
New Registered Agent's Signature, if changing Register	red Agent			
I hereby accept the appointment as registered agent. I am		of the position.		
Signature of New Po	Pagistared Agent if 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.

Example: 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>	Name	<u>Addres</u> s
1) Change		_	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
Kemove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

L. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)							
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<u>, </u>			· · · · · ·				
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. <u>If an</u>	amendment provid	des for an excha	ange, reclassit	fication, or ca	ncellation of i	ssued shares.	
pro	visions for impleme (if not applicable, in	enting the amen ndicate N/A)	dment if not	contained in t	<u>he amendmer</u>	t itself:	
		,					
				<u> </u>	28 BIV BBI II		
			<u> </u>	<u> </u>		•	
	-						
							
· · ·	<u> </u>						
	. <u> </u>						

The date of each amendment(s)	adoption: UD/25/2013
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amenament file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were as by the shareholders was/were:	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated 06/25	5/2013
Signature_	* (alexan)
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Steven Tallman
	(Typed or printed name of person signing)
	President
	(Title of person signing)