P97000100468

(R	equestor's Name)	
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(C	ity/State/Zip/Phone	#)
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(B	usiness Entity Nam	e)
(D	ocument Number)	
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SECRETARY: OF STATEMS
SECRETARY: OF CORPORATIONS
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COVER LETTER

TO: Amendment Section
Division of Corporations

. . ;.

NAME OF CORPORATION: MIAMI HIR REPAIR INC				
DOCUMENT NUMBER: <u>197000100668</u>				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter	to the following:			
CARLOS R	2. GONZALEZ Name of Contact Person			
MIAMI AIR REPAIR INC. Firm/ Company				
	- ·			
10730 SW 4	43 LANE			
<u>10730 SW 43 LANE</u> Address				
MIAMI FL	33/65 City/ State and Zip Code			
	City/ State and Zip Code			
E-mail address: (to be used for future annual report notification)				
E-mail address: (to be used	for future annual report notification)			
For further information concerning this matter, please ca	all:			
CARLOS R. GONZALEZ	at (305) 221-2200 Area Code & Daytime Telephone Number			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made pays	able to the Florida Department of State:			
\$35 Filing Fee \$\text{Certificate of Status}\$	1\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

Articles of Amendment to Articles of Incorporation of



MIAMI AIR REPAIR, INC.	<:47
(Name of Corporation as currently filed with the Florida Dept. of State)	
P97000100668	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendments Articles of Incorporation:	nent(s) to
A. If amending name, enter the new name of the corporation:	
QUALITY AIR REPAIR INC. The ne name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation.	ew.
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."	on he
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 Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:, Florida	
(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent; I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Signature of New Registered 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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change				<u></u> ,
Add				
Remove				
2) Change				Market and the Market and the second
Add				
Remove				
3) Change				
Add				
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4) Change	<u></u>			
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5) Change				
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Remove				**************************************
Kemove				
6) Change				· · · · · · · · · · · · · · · · · · ·
Add				·
Remove				

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

The date of each amendment(s) ad	option: 12-3-13
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement 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)
☐ The amendment(s) was/were ado	pted by the board of directors without shareholder action and shareholder
action was not required.	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
Dated	2-3-12
Signature	arles bonsales
selected	rector, president or other officer—if directors or officers have not been d, by an incorporator—if in the bands of a receiver, trustee, or other court red fiduciary by that fiduciary)
	CARLOS R. GONZALEZ (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)