

S90564

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

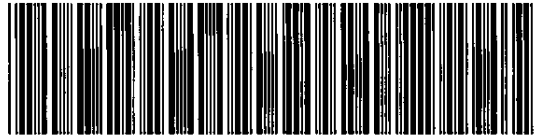
(Business Entity Name)

(Document Number)

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05/22/09--01014--022 **35.00

FILED
2009 JUN 15 AM 8:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

TB

6/17/09

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: TRAVEL WINGS Inc

DOCUMENT NUMBER: 390564

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

AleKxey Sabido
Name of Contact Person

TRAVEL WINGS Inc
Firm/ Company

1604 Pennsylvania Ave #1
Address

Miami Beach FL 33139
City/ State and Zip Code

aleKxeySabido@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AleKxey Sabido at (305) 926 8241
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 27, 2009

ALEKXEY SABIDO
TRAVEL WINGS, INC.
1604 PENNSYLVANIA AVE #1
MIAMI BEACH, FL 33139

SUBJECT: TRAVEL WINGS, INC.
Ref. Number: S90564

RECEIVED
2009 JUN 15 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for TRAVEL WINGS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 709A00017803

Dear TERESA,

Thank you for calling me in regards of the amendment of my corporation. As we talk in the phone I am sending you the copies I made for the original application with both the two original signatures on the top of the old ones. My cell phone is 305 926 8241 please contact me if there is something else to correct. Aleksey

Articles of Amendment
to
Articles of Incorporation
of

(Name of Corporation as currently filed with the Florida Dept. of State)

TRAVEL WINGS, Inc.

590564

(Document Number of Corporation (if known))

FILED
2009 JUN 15 AM 8:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "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."

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

1604 Pennsylvania Ave #1
Miami Beach FL 33139

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

1604 Pennsylvania Ave #1
Miami Beach FL 33139

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:

Sergio C Ponce (DT)

New Registered Office Address:

1604 Pennsylvania Ave #1

(Florida street address)

Miami Beach

(City)

Florida

(Zip Code)

33139

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

Sergio C. Ponce

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
DT	SERGIO C PONCA	1604 Pennsylvania Ave #1 Miami Beach FL 33139	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
DT	SABIDO-MENDIBURO Ivan Rene	1604 Pennsylvania Ave #1 MB. FL 33139	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
 (attach additional sheets, if necessary). (Be specific)

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)

The date of each amendment(s) adoption: 6/5/09

Effective date if applicable: 6/13/09
(no more than 90 days after amendment file date)

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)

☐ 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.

Dated 6/5/09

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)

Alexey Sabido
(Typed or printed name of person signing)

DVPS
(Title of person signing)