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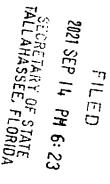
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S. PRATHE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: AXIOM LOGISTI	CS TRUCKING CORP	
DOCUMENT NUMB	ER:		
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
-		Name of Contact Person	1
-	<u> </u>	Firm/ Company	<u> </u>
-		Address	
-	<u> </u>	City/ State and Zip Code	:
-		sed for future annual report	notification)
For further information	concerning this matter, please		
BRANDON ARBOLEDA Name of Contact Person		at (de & Daytime Telephone Number
	the following amount made		•
■ \$35 Filing Fec	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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		Amend Divisio The Co	Address Iment Section In of Corporations In the thickness of Tallahassee I. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to

Articles of Inc	orporation	SEC SEC		
AXIOM LOGISTICS TRUCKING CORP		- AH CHE		
(Name of Corneration as currently	y filed with the Florida Dept. of State)	- 		
P09000026385	y med with the Florida Dept. of State)	RY O		
	f Corporation (if known)	FL S		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following	ng and Admend		
A. If amending name, enter the new name of the corporation:				
		The new		
name must be distinguishable and contain the word "corporation," "or "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	1 professional corporation name must contain	on "Corp.,"		
B. Enter new principal office address, if applicable:	11300 INTERCHANGE CIRCLE NORTH			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIRAMAR, FL 33025			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	11300 INTERCHANGE CIRCLE NORTH			
	MIRAMAR, FL 33025			
D. If amending the registered agent and/or registered office addinew registered agent and/or the new registered office address				
Name of New Registered Agent		_		
		_		
(riorida str	eet address)			
New Registered Office Address:	, Florida (Zip	(Zip Code)		
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v				
	. ,			
Signature of New R	egistered Agent, if changing	_		

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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	o <u>e</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) X Change	P		BRANDON ARBOLEDA	11300 INTERCHANGE CIR N
Add				MIRAMAR, FL 33025
Remove				
2) Change				
Add				
Remove Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

	authorize street, y	ecessary). (Be sp	recyic)			
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		for an exchange,	reclassification, o	or cancellation of i	ssued shares,	
<u>lf an ar</u>	nendment provides	na the amenamet	it it not contained	a in the amendine	it itscii.	
provis	ions fo <u>r implementi</u>	rate N/4)				
<u>provis</u> (<i>if</i>	nendment provides sions for implementing for implementing for indicable, indi	cate N/A)				
<u>provis</u> (<i>if</i>	ions fo <u>r implementi</u>	cate N/A)				
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<u>provis</u> (<i>if</i>	ions fo <u>r implementi</u>	cate N/A)				

	9/7/21			
The date of each amendment(s) adoption date this document was signed.	1:	, if	other	than the
-				
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)			
	(no more than 20 days after amenament file date)			
Note: If the date inserted in this block do document's effective date on the Department	ses not meet the applicable statutory filing requirements, this date vent of State's records.	vill not b	oe liste	ed as the
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopted by action was not required.	y the incorporators, or board of directors without shareholder action a	nd share	:holdei	r
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficien	y the shareholders. The number of votes east for the amendment(s) t for approval.			
	by the shareholders through voting groups. The following statement of our pentitled to vote separately on the amendment(s):	i		
"The number of votes east for the	amendment(s) was/were sufficient for approval	SÉC!	2021 SEP	
by		E E	SE	
	(voting group)	S S S	=	=
9/7/21	1	ΕΕ, 0 Υ	-	ļu
Dated		T (X)	₹	O
Signature	-la- State and	STATE	PM 6: 23	
(By a director, selected, by ar	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court ciary by that fiduciary)	>	ω	
BRAN	DON ARBOLEDA			
	(Typed or printed name of person signing)			
PRESI	DENT			
	(Title of person signing)			