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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF COR	PORATION: 7/C 4	OGISTIC, CORP.	
DOCUMENT N	umber: <u> <i>P</i>09000</u> ,	102969	
The enclosed Arti	icles of Amendment and fee a	are submitted for filing.	
Please return all c	orrespondence concerning th	is matter to the following:	
	SILVIA 6	UTIERREZ Name of Contact Person	
	TIC LOGISTI	Firm/ Company	
	6970 NW 5	Address	<del></del>
	MIAMI FC	ity/ State and Zip Code	·····
	E-mail address: (to be use	d for future annual report notification)	
For further inform	ation concerning this matter,	please call:	
SICVIA Name	GUT/ERRE 3- e of Contact Person	at ( <u>305</u> ) <u>406 · 0</u> Area Code & Daytime Tel	26 y ephone Number
Enclosed is a chec	k for the following amount n	nade payable to the Florida Depart	ment 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)
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301	e

## Articles of Amendment to Articles of Incorporation of

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		"UA

(Name of Corporation as currently filed with the Florida Dept. of State)	1200 17 0
	Sick of St.
U ~ U ~ ~ ~ 1 ~ ~ 0 / 0	1 (83) E
Pogoolo2969 (Document Number of Corporation (if known)	10g

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

CORP	N H	, , , , , , , , , , , , , , , , , , , ,	The
designation "Corp	," "Inc," or	"Co". A professional co	t or orpora
licable:		<u></u>	
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stered office addre	<u>-</u>	)	<u>e</u>
(Florida (City)	street address	) , Florida	
: :	designation "Corp, fessional association licable: TADDRESS)  CE BOX	designation "Corp," "Inc," or fessional association," or the ab	<u> </u>

Page 1 of 3

## 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> Address Type of Action ☐ Add ☐ Remove ☐ 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	t(s) adoption: 2 1/3 1//
Effective date <u>if applicable</u> :	(date of adoption is required)
Effective date in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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)
	(voling group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder action and shareholder
Dated Signature	HARCH 1, 2011  Support of the state of the s
sele	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	S/LVIA GUTIERREZ  (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)