P11000107394

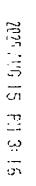
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ALL LOGISTICS	GROUP, INC.		
	BER: P11000107394			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	RUBEN G. LARA			
		Name of Contact Person	1	
	ALL LOGISTICS GROUP, I	NC.		
	Firm/ Company			
	7001 NW 84 AVENUE			
		Address		
	MIAMI, FL 33166			
		City/ State and Zip Code	0	
	ANANDB@BELLSOUTH.N	NET .		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas		216-0100	
	of Contact Person	at (305)de & Daytime Telephone Number	
	or the following amount made			
■ \$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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

Articles of Amendment to Articles of Incorporation of

ALL LOGISTICS GROUP, INC.

7100 000				
(Name of Corporation as	currently filed with the	Florida Dept. of State)		
	P11000107394			
(Document N	lumber of Corporation (if	known)		
Pursuant to the provisions of section 607.1006, Florida Statuts Articles of Incorporation:	ites, this Florida Profit Co	orporation adopts the follow	ing amen	dment(s)
A. If amending name, enter the new name of the corporation	ation:			
			The	new
ame must be distinguishable and contain the word "corpord Inc.," or Co.," or the designation "Corp," "Inc," or 'chartered," "professional association," or the abbreviation	"Co". A professional co	ecorporated" or the abbrevia orporation name must cont	tion "Cor ain the w	p" ord
. Enter new principal office address, if applicable:				_
Principal office address <u>MUST BE A STREET ADDRES.</u>	<u>S</u>)	-	150	
			(5)	- . ;
		<u> </u>	رن زرا	 , •
. Enter new mailing address, if applicable:			- -)	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			<u>- ६३ -</u> ५३	- <i>:</i>
			6)	
		A dl Cale		
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 		enter the name of the		
Name of New Registered Agent				
Name of New Registered Agem	*****	_	_	
	·lorida street address)		_	
·	,	P14.		
New Registered Office Address:	(City)	, Florida (Zi,	p Code)	
	•			
ew Registered Agent's Signature, if changing Registere				
hereby accept the appointment as registered agent. I am j	familiar with and accept to	he obligations of the position	1.	
	of New Registered Agent,	if changing	_	
v				
Check if applicable				

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	VICTOR E. LARA	7001 NW 84 AVENUE
Add			MIAMI. FL 33166
X Remove			
2) Change	D	JUAN J. LARA	7001 NW 84 AVENUE
Add			MIAMI, FL 33166
X Remove Change	D	HECTOR G. LARA	7001 NW 84 AVENUE
Add			MIAMI, FL 33166
X Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

(Attach	i <mark>ding or adding addit</mark> additional shects, if ne	vessary). (Be sp	ecific)			
					·	
						
						
					·	
			· - · · · ·	 	·	
						
			<u> </u>	<u> </u>		
						<u> </u>
provi:	mendment provides f sions for implementin	g the amendment	if not containe	or cancellation <u>o</u> d in the amendn	ient itself:	
(į	not applicable, indica	ite N/A)				
			· · · · - ·			-

	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment	file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing recepartment of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors witho	ut shareholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast fufficient for approval.	or the amendment(s)
	proved by the shareholders through voting groups. The each voting group entitled to vote separately on the a	
"The number of votes cas	for the amendment(s) was/were sufficient for approva	al .
by		."
	(voting group)	-
AUGUST	5, 2025	
Dated		
-1	\)	
Signature	lirector, president or other officer – if directors or offic	ware have not have
selecte	ed, by an incorporator – if in the hands of a receiver, trued fiduciary by that fiduciary)	
-11	RUBEN G. LARA	
	(Typed or printed name of person signing))
	PRESIDENT	
	(Title of person signing)	