P16000000598

| (Re | questor's Name) | | |
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| (City/State/Zip/Phone #) | | | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Bu | siness Entity Nar | me) | |
| (Document Number) | | | |
| Certified Copies | _ Certificates | s of Status | |
| Special Instructions to Filing Officer: | | | |
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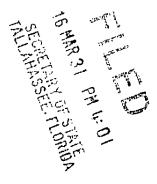
Office Use Only



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APR 01 2016 A RAMSEY BEPAPTMENT SE C. ATT

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

| Logixx Logistics Inc. | | | | |
|-----------------------|--------------|----------|---|--------------------------------|
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| | | <u> </u> | | |
| | <u>-</u> | | | |
| | | | | Art of Inc. File |
| | | | | LTD Partnership File |
| | | | l | Foreign Corp. File |
| | | | | L.C. File |
| | | | | Fictitious Name File |
| | | | | Trade/Service Mark |
| | | | | Merger File |
| | | | | Art. of Amend. File |
| | | | | RA Resignation |
| | | | | Dissolution / Withdrawal |
| | | | | Annual Report / Reinstatement |
| | | | | Cert. Copy |
| | | | | Photo Copy |
| | | | | Certificate of Good Standing |
| | | | | Certificate of Status |
| | | | | Certificate of Fictitious Name |
| | | | | Corp Record Search |
| | | | | Officer Search |
| | | | | Fictitious Search |
| Signature | | | | Fictitious Owner Search |
| | | | | Vehicle Search |
| | | | | Driving Record |
| Requested by: Seth | 3/31/16 | | | UCC 1 or 3 File |
| Name | Date | Time | | UCC 11 Search |
| | | | | UCC 11 Retrieval |
| Walk-In | Will Pick Up | <u> </u> | | Courier |

COVER LETTER

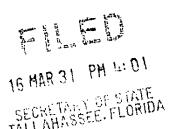
TO: Amendment Section Division of Corporations

| NAME OF CORPO | DRATION: Logixx Logistics I | nc. | | |
|--------------------------|---|--|--|--|
| DOCUMENT NUM | 1BER: P16000000598 | | | |
| The enclosed Article | s of Amendment and fee are su | ibmitted for filing. | | |
| Please return all corr | espondence concerning this ma | atter to the following: | | |
| | Maximilian Schenk, Esq. | | | |
| | | Name of Contact Perso | n | |
| | Schenk & Associates, PLC | | | |
| | <u></u> | Firm/ Company | | |
| | 1001 Brickell Bay Drive, Sui | ite 1200 | | |
| | Address | | | |
| | Miami, FL 33131 | | | |
| | | City/ State and Zip Cod | <u></u> | |
| | | on), orace and only ode | • | |
| mjs(| ®schenk-law.com | | | |
| | E-mail address: (to be us | sed for future annual report | notification) | |
| For further informati | on concerning this matter, pleas | w call | | |
| or rather mornan | on concerning and matter, preas | se can. | | |
| Maximilian Schenk | | at (305 | de & Daytime Telephone Number | |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number | |
| Enclosed is a chéck (| or the following amount made | payable to the Florida Depa | artment 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 | | Street | Address | |
| | nendment Section | | Iment Section | |
| Division of Corporations | | Division of Corporations Clifton Building | | |
| |), Box 6327 Habussee, FL 32314 | | - Buнding Secutive Center Circle | |



Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



| Logixx Logistics Inc. | TALLAHASSECT |
|--|--|
| (Name of Corporati | ion as currently filed with the Florida Dept. of State) |
| P16000000598 | |
| (Docum | ment Number of Corporation (if known) |
| Pursuant to the provisions of section 607,1006, Floridate Articles of Incorporation: | a Statutes, this Florida Profit Corporation adopts the following amendment(s) |
| A. If amending name, enter the new name of the co | orporation: |
| | |
| | rd "corporation," "company," or "incorporated" or the abbreviation o, "Inc," or "Co". A professional corporation name must contain the |
| B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET ADI</u> | |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO | <u></u> |
| | |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered | red office address in Florida, enter the name of the 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 Reg | nictored Apunt |
| | I am familiar with and accept the obligations of the position. |
| • | |
| | |
| Sim | natura of New Pagistered 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 Doe | |
|-------------------------------|-------------|----------------|----------------------------------|
| X Remove | Y | Mike Jones | |
| _X.Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Tide</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | Sec | Carlos Sanchez | co Schenk |
| XAdd | | | 1001 Brickell Bay Dr., Ste. 1200 |
| Remove | | | Miami, FL 33131 |
| | | | |
| 2) Change | · | | |
| Add | | | |
| Remove | | | |
| 3) Change | <u> </u> | | |
| Add | | | |
| Remove | | | |
| | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| . a | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| | | | |
| Add | | | |
| Remove | | | |

| famending or adding additional Artic Attach additional sheets, if necessary). | (Be specific) |
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| f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A) | nange, reclassification, or cancellation of issued shares, indment if not contained in the amendment itself; |
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| | |

| The date of each amendment(s) adoption: | , 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 block does not meet the applicable statutory filing requirements, this date of document's effective date on the Department of State's records. | will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cust 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 03/33/12/06 | |
| Signature (Ity a directory president or other officer – if directors or officers have not been | |
| selected, by the important - if in the hands of a receiver, trustee, or other court | |
| appointed liduciary by that fiduciary) | |
| Tiago P. Mendes | |
| (Typed or printed name of person signing) | |
| Director | |
| (Title of person signing) | |