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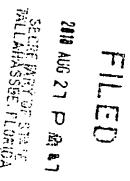
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AUG 2 8 2018



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: CAIMAN CARGO) INC	
DOCUMENT NUN	P17000010628		
The enclosed Article	s of Amendment and fee are su	ibmitted for filing.	
Please return all corr	espondence concerning this ma	itter to the following:	
	JULIO A ESPINEIRA		
		Name of Contact Person	n
	CAIMAN CARGO INC		
	-	Firm/ Company	
	161 NW 85 PLACE		
	-	Address	
	MIAMI, FL 33126		
		City/ State and Zip Cod	e
For further informati	e-mail address: (to be use) on concerning this matter, pleas	sed for future annual report	notification)
JULIO A ESPINEI	RA .	305	721-9223
Name	of Contact Person	at (305) 721-9223 Area Code & Daytime Telephone Numb	
Enclosed is a check t	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)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Di P.G	ailing Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Ameno Divisio Cliftor	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

CAIMAN CARGO INC	2019
(Name of Corporation	as currently filed with the Florida Dept. of State 27 P 2: 17
P17000010628	FART COETARIA DE OTRA
(Document	nt Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida St its Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corp	<u>oration:</u>
N/A	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRE</u>	ESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
N/A	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registo	ered Agent:
	im familiar with and accept the obligations of the position.
Signatu	ure of New Registered 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	PT John	n Doe	
\underline{X} Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	V	JULIO M. ESPINEIRA JR.	161 NW 85th PL
X Add			MIAMI, FL 33126
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u></u>	
Add			
Remove			
6) Change		**************************************	
Add			
Remove			

<u>Hamending or adding additional Article</u> (Attach additional sheets, if necessary).	(Be specific)			
		-		
				
	-		 	
			·	
				
If an amendment provides for an exclusions for implementing the ame	nange, reclassification	n, or cancellation o	f issued shares.	
(if not applicable, indicate N/A)	nument it not contain	neg in the amendin	ent usen;	
				
				
				
			· · -	
				
				

The date of each amendment(s) a	idoption:	, if other than the
date this document was signed.		
	PTEMBER 01, 2018	
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 requirements, this date epartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statemen or each voting group entitled to vote separately on the amendment(s):	ı
"The number of votes cas	it for the amendment(s) was/were sufficient for approval	
by	<u>."</u>	
	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder	
action was not required.		
08/23/201	8	
Dated Signature		
(B) a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	JULIO A. ESPINEIRA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	