G39384

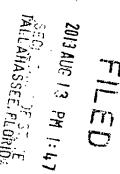
(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: <u>Rosy Servi</u>	CES FORWARDERS, CO	ORP.
DOCUMENT NUMB	ER: <u>G39384</u>		
The enclosed Articles of	of Amendment and fee are su	ibmitted for filing.	
Please return all corresp	condence concerning this ma	tter to the following:	
_	EDGARDO JIMENEZ		
		Name of Contact Person	ı
	ROSY SERVICES PO	RWARDERS, CORP.	
_		Firm/ Company	
	7000 NW 25TH STR	EET	
-		Address	
	MIAMI, FL 33122		
-		City/ State and Zip Cod	e
	EDJIMENEZ@RFSINT	L.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
EDGARDO JIMEN	EZ	at (305) 591–4443
Name of Contact Person Area Code & Daytime Telephone			
Enclosed is a check for	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)
<u>Mail</u>	ing Address	Street	Address
Amendment Section		Amendment Section	
	ion of Corporations		on of Corporations
	Box 6327 hassee, FL 32314		Building excutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

G39384			> ₹	<u> </u>
(Document Number of Corpo	ention (if Imperm)		P :	anv (
(Document Number of Corpo	ration (11 known)		AHA	2
ursuant to the provisions of section 607.1006, Florida Statu	tes, this <i>Florida Profit Co</i>	rporation adop	ts the following a	mendmen
s Articles of Incorporation:			ine in	~ 0
A. If amending name, enter the new name of the corpora	tion:		<u> </u>	Œ
in this is a second of the sec			92 N	·
				he ne w
ame must be distinguishable and contain the word "co. Corp.," "Inc.," or Co.," or the designation "Corp," "In				
ord "chartered." "professional association," or the abbre		mar co.poramo	in many mass con	
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS				
Timespat office address MOST DE A STREET ADDRESS				
. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
. If amending the registered agent and/or registered off	lice address in Florida, er	iter the name	of the	
new registered agent and/or the new registered office			<u> </u>	
Name of New Bosisters I Asset				
Name of New Registered Agent				
<u></u>				
(F	lorida street address)			
New Registered Office Address:		, Florida		
	(City)		(Zip Code)	
ew Registered Agent's Signature, if changing Registere		1.7		
ew Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am f		e obligations o	f the position.	

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> Jol	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Manager	Michael DeBartolo	735 N.W. 165 Ave.
Add	М		Pembroke Pines, FL 33028
2) Change Add		·	
Remove 3) Change Add			
Remove 4) Change			
Add	·		
5) Change Add			
Remove			
6) Change			
Remove			

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
	
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

date this document was signed.	, ii other than th
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 08/12/2013	
Signature (By director president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
EDGARDO JIMENEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	