## P01000016262

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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SECRETARY OF STATE TALLAHASSEE, FLORID

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 4, 2011

MAURICIO ALZATE STAT LOGISTICS, INC. 4150 NW 7TH S, STE 101 (2ND MAILING) MIAMI, FL 33126

SUBJECT: STAT LOGISTICS, INC. Ref. Number: P01000016262

We have received your document for STAT LOGISTICS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is no statutory provision to file articles of correction to correct an annual report. The amendment form is the proper form to file.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 611A00005894

There is no statutory provision to file articles of correction to correct an annual report. An amended annual report would need to be filed. The amended annual report is filed online at our website, www.sunbiz.org.

## **COVER LETTER**

Division of Corporations
NAME OF CORPORATION: STAT LOGISTICS, INC.
DOCUMENT NUMBER: P01000016262
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mauricio Alzate Name of Contact Person
STAT LOGISTICS, INC.
4150 NW 7th st Suite 101
Miami Fl 33126  City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mauricio Alzate at (786) 251-3009 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status  Certified Copy Certificate of Status  (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to FILED					
Articles of Incorporation					
Articles of Incorporation of 11 APR 20 PM 2: 19					
STAT LOGISTICS, INC. SECRETARY OF STATE (Name of Corporation as currently filed with the Florida Dept. of State)					
(Name of Corporation as currently filed with the Florida Dept. of State)					
P01000016262					
(Document Number of Corporation (if known)					
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followin amendment(s) to its Articles of Incorporation:					
A. If amending name, enter the new name of the corporation:					
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."					
B. Enter new principal office address, if applicable: 4150 NW 7th St #101					
(Principal office address MUST BE A STREET ADDRESS)  Miami Fl 33126					
C. Francisco W. and March 16 and 15 black					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)					
•					
D. 16 man line the major of the major of the major of the second					
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:					
Name of New Registered Agent: Mauricia Alzate					
Name of New Register Agent.					
New Registered Office Address: (Florida street address)					
Migni H 33126 Florida					
T. Contra					
(City) (Zip Code)					
New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.					
Signature of New Registered Agent, if changing					
Signature of the hegister carrieging					

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)

Title	Name	Address Type of Action
1_	Mauricio Alzate	4150 NW 7th st \$101 Add Add Chy
•		Mlani 71 33126 - Remove
10	Rick Nielsen	4150 NW 7th 51 #101 E. Add Mani Fl 33126   Remove
<u>V1</u>	KICK MEISEN	4150 NW M SI #101 E Add
		Mura 4 9506 Li Remove
-		
	ing or adding additional Articles, ente	
(attach ad	ditional sheets, if necessary). (Be spec	rific)
<del></del>		
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		classification, or cancellation of issued shares, f not contained in the amendment itself:
	ot applicable, indicate N/A)	The Committee of the Co
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	_	•
	,	

The date of each amendment(s	
Constant day to a contract	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
	· · ·
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	poting group)
6	oting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated	
Signatur	Namuni alrata
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 med fiduciary by that fiduciary)
	Mauricio Alzate
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)