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SECRETARY OF STATE

Amend

OCT 20 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PAMOR LOGISTIC	:s Group Services IN
DOCUMENT NUMBER: P-010 000 806 95	
The enclosed Articles of Amendment and fee are submitted for fili	ng.
Please return all correspondence concerning this matter to the follo	wing:
Maricela Lic Name of Contact Person	ENZI
PAMAR LOGISTICS Group Firm/ Company	B EBLYICES TAC.
9999 NW 89th AVE Address	2- Bay-18-19
Medley FL 33178 City/ State and Zip Code	3
E-mail address: (to be used for future annual repo	net notification)
For further information concerning this matter, please call:	
Maricela licenzi at (385 Name of Contact Person Area Code	882 - 1088 e & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the l	Florida Department of State:
Sas Filing Fee Sas Satus Status Status Status Status Status Sas Status Sas Status Sas Status Sas Sas Sas Sas Sas Sas Sas Sas Sas Sa	Certificate of Status
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CoP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 ExecutiveTallahassee, FlTallahassee, Fl	ection orporations og e Center Circle

Articles of Amendment

· Articles of Incorporation

MORT IS AND 30 P-010 000 B0695

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

me must be distinguishable and contain breviation "Corp.," "Inc.," or Co.," or the me must contain the word "chartered," "pro	e designation "Corp," "Inc	," or "Co". A professional corpora
•	•	me aborevanon 1.A.
Enter new principal office address, if apprincipal office address MUST BE A STREE		·
Enter new mailing address, if applicable	::	
which well minimize had boot it abbitchold		
(Mailing address MAY BE A POST OFFI		
(Mailing address MAY BE A POST OFF) If amending the registered agent and/or	CE BOX) registered office address in	n Florida, enter the name of the
(Mailing address <u>MAY BE A POST OFFI</u>	CE BOX) registered office address in	n Florida, enter the name of the
(Mailing address MAY BE A POST OFF) If amending the registered agent and/or	CE BOX) registered office address in	n Florida, enter the name of the
(Mailing address MAY BE A POST OFF) If amending the registered agent and/or new registered agent and/or the new registered agent.	CE BOX) registered office address in	n Florida, enter the name of the
(Mailing address MAY BE A POST OFF) If amending the registered agent and/or new registered agent and/or the new registered agent.	CE BOX) registered office address in	
(Mailing address MAY BE A POST OFF) If amending the registered agent and/or new registered agent and/or the new registered agent? Name of New Registered Agent:	registered office address in	
(Mailing address MAY BE A POST OFF) If amending the registered agent and/or new registered agent and/or the new registered agent? Name of New Registered Agent:	registered office address in	ddress)
(Mailing address MAY BE A POST OFF) If amending the registered agent and/or new registered agent and/or the new registered agent? Name of New Registered Agent:	registered office address in istered office address: (Florida street a	ddress), Florida

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>P</u>	Benigna Ochy Maricela Licenzi	2315 Columbia Weston FL 32376	Add Remove
VP_	Maricela Licenzi	245 Ibrickell Ave 419-FC 33129	Add Remove
			Add Remove
*	ending or adding additional Articles, enter additional sheets, if necessary). (Be speci		
provi	amendment provides for an exchange, rec sions for implementing the amendment if f not applicable, indicate N/A)		
	•		
			, , ,,

The date of each amendment(s)	adoption:		
	(date of adoption is required)		
(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.		
	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 case	st for the amendment(s) was/were sufficient for approval		
by	oting group)		
(v	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	Benga Ochy director, president or other officer – indirectors or officers have not been		
selecte	ed, by an incorporator – if in the hands of a receiver, trustee, or other court ated fiduciary by that fiduciary)		
-	(Typed or printed name of person signing)		
-	PRESIDENT (Title of person signing)		