## PD2 0000 96/68

(Re	questor's Name)	
(Ad	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
		:

Office Use Only



900200813799

04/08/11--01038--002 \*\*25.00

05/09/11--01011--019 \*\*10.00

SECRETARY OF STATE
TALLAHASSEE FLORIDA

TO 11

5-10-11

FILED
11 HAY -6 AN 8: 29
SECRETARY OF STATE

## **COVER LETTER**

**TO:** A'mendment Section Division of Corporations

NAME OF CORPORATION:ANDOREXP	LESSWAY CORP.	
DOCUMENT NUMBER: Po 200009614	28	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matt	er to the following:	
ROSA G. HERNANI Name of	DEZ	
Name of	Contact Person	
ANDOR EXPRESSI	NAY CORP.	
rim	Company	
17071 W. DIXIE HIG	HWAY STE. 305	
NORTH MIAMI BEACH City/Stat	FLOLIDA 33160 e and Zip Code	
GOLDROSEREA TYQ	ADI. CAM	
E-mail address: (to be used for fur	ure annual report notification)	
For further information concerning this matter, please	call:	
ROSA G. HERNANDEZ  Name of Contact Person	at ( <u>305</u> ) <u>244 - 4033</u>	
Enclosed is a check for the following amount made pa		
<b>X</b> \$35 Filing Fee	]\$43.75 Filing Fee & Certified Copy       ☐ \$52.50 Filing Fee Certificate of Status         (Additional copy is enclosed)       Certified Copy (Additional Copy is enclosed)	
	treet Address	
	Amendment Section	
<del>_</del>	Pivision of Corporations Flifton Building	
	661 Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

FILED 11 HAY -6 AH 8: 29

SECRETARY OF STATE ANDOR EXPRESSIVAY COLP. (Name of Corporation as currently filed with the Florida Dept. of State) P02000096168 (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: A. If amending name, enter the new name of the corporation: 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." 16801 NE 15 AVENUE B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: 17071 W. DIXIE HWY STE. 305 (Mailing address MAY BE A POST OFFICE BOX) 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: ROSA G. HERNANDEZ Name of New Registered Agent: 17071 W. DIXIE HWY STE 305 (Florida street address) New Registered Office Address: , Florida<u>33160</u> New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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: (Anach additional sheets, if necessary)

<u>Title</u>	Name	Address_	Type of Action	
Pl <u>es.</u>	REFAT ALTAWIL	17071 W. DIXIE HWY. STE 305 NORTH MIAMI BEACH FL	_ ☑ Add _ □ Remove 23160	
<u>V. P.</u>	(MOH'D AMIN) KAMAL, IHAB	17071 W. DIXE HWY. STE 305 NORTH MHAMI BEACH ?	_ □ Add □ Remove □ 33160	
SECTRY	ROSA G. HERNANDEZ	17071 W. DIXIE HWY. STE 305 NORH MIAMI BEACH F	_ ☑ Add _ ☐ Remove Ĺ 33/60	
	ling or adding additional Articles, enter additional sheets, if necessary). (Be speci			
·				
	<del></del>			
	·			
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)				
			,	
	·			

The date of each amendment(s) adoption: 5/2///			
Effective data if applicable.	(s) adoption: 5/2-/// (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	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.		
	e 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 c	east for the amendment(s) was/were sufficient for approval		
by	,,,		
	(voting group)		
action was not required.  The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder		
· Dated	5/2/11		
selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)		
	(Typed or printed name of person signing)		
	Socretary (Title of person signing)		