## P0400105334

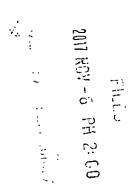
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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C. GOLDEN NOV 0 7 2017

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: LORD & DELIVE	RY CORP			
DOCUMENT NUMBE	R:				
	Amendment and fee are su	bmitted for filing.			
Please return all correspo	ondence concerning this ma	tter to the following:			
JL	JAN P GARCIA				
	Name of Contact Person				
_		Firm/ Company	<del></del>		
3-	3412 SUNRISE VILLA CT				
_	Address				
T.	AMPA, FL 33614				
_		City/ State and Zip Code	2		
GORDI	TOPABLO@GMAIL.COX	[			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information of	oncerning this matter, pleas	e call:			
JUAN P GARCIA		at (	de & Daytime Telephone Number		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for the	he following amount made p	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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILEU

LORD & DELIVERY CORP		2017 NGV - 6 PH 2: 00
(Name of Corporation as curren	tly filed with the Florida Dept. c	of State)
P04000165334		The state of the state of the
(Document Number	of Corporation (if known)	81
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adop	pts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation	
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
	<u>-                                      </u>	
	<del></del>	
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre		of the
	<del>55.</del>	
Name of New Registered Agent	<u> </u>	
(Florida s	street address)	
New Registered Office Address:		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Ager	ıt:	
I hereby accept the appointment as registered agent. I am familian	with and accept the obligations of	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:

(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>	John Doc		
X Remove	<u>V</u>	Mike Jones		
_X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	VP	MARIA DEL P. GARCES	3412 SUNRISE VILLA CT N	
X Add			TAMPA, FL 33614	
Remove				
2) Change				
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6)Change			<del>-</del>	
Add				
Remove				

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
<del></del>	
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and and in the amendment itself:

	11/02/2017	
	adoption:	, if other than the
date this document was signed.	•	
Effective date <u>if applicable:</u>	/02/2017	
intective date ir applicable:	(no more than 90 c	days after amendment file data)
Note: If the date inserted in this document's effective date on the E		ole statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ac by the shareholders was/were s		number of votes east for the amendment(s)
		gh voting groups. The following statement te separately on the amendment(s):
"The number of votes cas	at for the amendment(s) was/were	sufficient for approval
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	lopted by the board of directors w	ithout shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	lopted by the incorporators withou	it shareholder action and shareholder
11/02/20	17	
Dated	Ivan Maril	
ا ــــان الله الله الله الله الله الله الله ال	director, president or other officer ed, by an incorporator – if in the b med fiduciary by that fiduciary)	- if directors or officers have not been hands of a receiver, trustee, or other court
	JUAN P GARCIA	
	(Typed or printed na	me of person signing)
	PRESIDENT	
	(Title of	person signing)