P05000118012

(Requestor's Name)					
(Address)					
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(City	//State/Zip/Phone	e #)			
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Amend

APR 2 9 2014 T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Arrow Logistics Services, Inc.					
DOCUMENT NUMBER: P05000118012					
	of Amendment and fee are sub				
Please return all corres	pondence concerning this mat	ter to the following:			
	Erich M Bendixen				
•		Name of Contact Person	1		
	Arrow Logistics S	ervices. Inc.			
	<u> </u>	Firm/ Company			
	7900 NW 68th Sti	• •			
•		Address			
	Miami, Florida 33	166			
		City/ State and Zip Code	;		
arro	owlogistics@bellso	outh net			
		ed for future annual report	notification)		
	`	•	•		
For further information	n concerning this matter, pleas	e call:			
Erich M Bendixen: 305 984-6640					
			de & 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 & 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		Street Address			
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
P.O.	Box 6327	Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301			

Articles of Amendment to Articles of Incorporation of



Arrow Logistics Services, Inc.		14 APR 21	AH 10: 59
(Name of Corporation as currently	y filed with the Florida Dept.	of State)	
P05000118012			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this <i>Florida Profi</i>	t Corporation adopts the follo	wing amendment(s) to
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or to B. Enter new principal office address, if applical	orp," "Inc." or "Co". A profe the abbreviation "P.A." ble:		
(Principal office address <u>MUST BE A STREET A.</u>	<u>DDRESS</u>)		
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	BOX)		
D. If amending the registered agent and/or regis	stered office address in Florid	a. enter the name of the	_
new registered agent and/or the new register		<u> </u>	
Name of New Registered Agent			
	, (Florida street address)		
New Registered Office Address:		Florida	
	(City)	(Zip Code,)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		ot the obligations of the positi	on.
Secretary of the second of the		Tring-interior of the points	

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 Doe				
X Remove	<u>V</u>	Mike Jones				
_X Add	. <u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s			
1) Change	<u>V</u>	Ernesto Oscar Del Riego	3250 SW 110 Ct.			
✓ Add			Miami, Florida 33165			
Remove		· ·				
2) Change						
Add						
Remove						
3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

Attach a	additional sheets, if ne	onal Articles, el cessary). (Be s	specific)	<u></u> ,		
				 -		
						
•						
			<u> </u>	·		
			: ¯	<u>.</u>		
	·-			<u>-</u>		
	<u> </u>					
provisi	nendment provides fo ions for implementing not applicable, indica	the amendmer	reclassification of it if not conta	on, or cancella ined in the am	tion of issued sh endment itself:	ares.
		·				
				·		
	·					
				<u></u>		
						

The date of each amendment(s) adoption: 04/16/2014	, if other than the
date this document was signed.	
Effective date if applicable: 04/16/2014	
(no more than 90 days a	fter amendment file date)
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through voti must be separately provided for each voting group entitled to vote separately	
"The number of votes cast for the amendment(s) was/were sufficient	ent for approval
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without action was not required.	shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators without share action was not required.	eholder action and shareholder
Dated 04/16/2014	
Signature Sulf B	
(By a director president or other officer - if d	
selected, by an incorporator – if in the hands of appointed fiduciary by that fiduciary)	of a receiver, trustee, or other court
Erich M Bendixen	
(Typed or printed no	ame of person signing)
President	
(Title of per	rson signing)