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	equestor's Name)	
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(Ac	ddress)	
V.	·····	
(Ad	ddress)	
(Ci	ity/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bo	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
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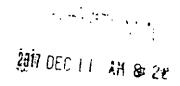
COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION: Living Rock Logis	ties Corp.	
DOCUMENT NUMBER	P06000041153		
The enclosed Articles of A		bmitted for filing.	
Please return all correspond	dence concerning this ma	tter to the following:	
Chri	s Youmans		
		Name of Contact Person	1
Livi	ng Rock Logistics Corp.		
		Firm/ Company	
193-	4 Hawaii Ave NE		
		Address	
Sain	t Petersburg, FL 33703		
		City/ State and Zip Code	0
cenouman	s@reagan.com		
		sed for future annual report	notification)
	T. man address. (to be as	ed for taldre annual report	nomedian)
For further information cor	ocerning this matter, pleas	se call:	
Chris Youmans		at (⁷²⁷	de & Daytime Telephone Number
Name of Co	ontact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Florida Depa	urtment 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)
Division P.O. Box	ent Section of Corporations	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assec, FL 32301

Articles of Amendment to Articles of Incorporation of



Living Rock Logistics Corp.

(Name of Corporation as current	ly filed with the Florida Dept. of State)
P06000041153	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
· · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OF FICE BOX</u>)	P.O. Box 7486
	Saint Petersburg, FL 33734
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	
Name of New Registered Agent	
(Florida st	reet address)
New Registered Office Address:	. Florida
New Registered Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
Signature of New 1	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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Michael Eugene Solomon	6406 Baux Mountain Ro Winston-Sclem, NC
📈 Add			Winston-Sclem, NC
Remove			27105
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	<u>. </u>		
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
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f an amendment provides for an exch provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) a date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
<u>паружане</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this datepartment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes east for the amendment(sufficient for approval.	;)
	oproved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	mi
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
☐ The amendment(s) was/were action was not required.	lopted by the board of directors without shareholder action and shareholde	er
☐ The amendment(s) was/were ac action was not required.	lopted by the incorporators without shareholder action and shareholder	
Novembe Dated Signature	r, 17, 2017	
(By a 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 counted fiduciary by that fiduciary)	t
	Chris S. Youmans	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	