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(Re	equestor's Name)	·····
(Ac	Idress)	
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(Cit	ty/State/Zip/Phone	e #)
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SECRETARY GF STATE
TALLAHASSEE FLORIDA

Organia

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF COR	PORATION: <u>CRUZ</u>	BROKERALE, INC	
DOCUMENT NU	JMBER:	54229	
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
	MARÎTZA MEN	ODO ZN of Contact Person)	
	CRUZ BROKER	RGE, JUC.	
	12841 SW 43	Dr. Apt. 152A (Address)	
	MiAMI, FL. 3:	3175 tate and Zip Code)	
For further inform	ation concerning this matter,	please call:	
`	e of Contact Person) k for the following amount:	at (<u>305</u>) <u>282</u> . (Area Code & Daytim	- 2\2\ e Telephone Number)
□\$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 A Amendmer Division of P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	CRUZ BROKERALE, INC.
	(Name of corporation as currently filed with the Florida Dept. of State)
	TALECRE TALE
	P060000541229
	(Document number of corporation (if known)
	(Name of corporation as currently filed with the Florida Dept. of State) (Name of corporation as currently filed with the Florida Dept. of State) (Document number of corporation (if known) (Document number of corporation (if known) provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation wing amendment(s) to its Articles of Incorporation:
NEW CORPO	RATE NAME (if changing):
Must contain the v A professional con	word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") reporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
	TS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) Citle(s) being amended, added or deleted: (BE SPECIFIC)
Article	TIT PUTPOSE
	SAID COFFORATION IS to TrANSPORT CUSTOMS
	business As A broker.
	(Attach additional pages if necessary)
	nt provides for exchange, reclassification, or cancellation of issued shares, provision the amendment if not contained in the amendment itself: (if not applicable, indicate N
	NA.
	·
<u> </u>	•

(continued)

The date of each amendment(s) adoption:
Effective date if applicable: (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval by
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signature (By a director, president or other officer - if directors or difficers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
Presidem (Title of person signing)

FILING FEE: \$35