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Office Use Only



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05/24/12--01009--018 \*\*35.00

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

DOCUMENT NUMB The enclosed Articles	PERUVIAN BER: P07000077923 of Amendment and fee are sub-	omitted for filing.			
Please return all corres	spondence concerning this mat	ter to the following:			
	ROSA CAVALIE				
	PERUVIAN CAR	Name of Contact Person			
		Firm/ Company			
	5220 WATERMIL	L LANE 302			
	TITUSVILLE FL 3	Address 32780			
		City/ State and Zip Code			
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:					
ROSA CAVALIE		a (954	969-9992		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	r the 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 Tallphasses, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building yeartive Center Circle		

Tallahassee, FL 32301

## **Articles of Amendment** Articles of Incorporation of

PERUVIAN CARGO CORP	
(Name of Corporation as currently filed with the Florida Dept. of State)	-
P07000077923	
(Document Number of Corporation (if known)	•
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followin its Articles of Incorporation:	g amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the a "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must word "chartered," "professional association," or the abbreviation "P.A."	bbreviation 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 MAY BE A POST OFFICE BOX)	DIVISION O
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:  Name of New Registered Agent	SECRETARY 24 AH 9: 13
(Florida street address)	
New Registered Office Address: , Florida (Zip Code)	-
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:

(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	Name	. Address
1) X Change Add Remove	D	CAVALIE HUMBERTO H	5220 WATERMILL LANE 302 TITUSVILLE FL 32780
2) Change Add Remove	VP	MARYLIN CAVALIE	5220 WATERMILL LANE 302 TITUSVILLE FL 32780
3 ) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

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

The date of each amendment(s) adoption: MAY 7, 2012		
Effective date if applicable:	MAY 7, 2012	
in 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	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	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 of	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder  adopted by the incorporators without shareholder action and shareholder	
Dated_MAY	77, 2012	
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	HUMBERTO S. CAVALIE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	