P0700008849

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Amend
Brown 7-11-11

COVER LETTER 4

TO: Amendment Section Division of Corporations

NAME OF CORP	PORATION:	Pacific Logistics Corp)
DOCUMENT NU	MBER:	P07000088499	
The enclosed Artic	les of Amendment and fee a	re submitted for filing.	
Please return all co	rrespondence concerning thi	s matter to the following:	
-		Andres Chiriboga	
	.N	lame of Contact Person	
-	Pa	cific Logistics Corp	
	•	Firm/ Company	
-	8305 NW 27 Street, #104		
		Address	
-		Miami, Fl 33122	
	C	ity/ State and Zip Code	
	pacificblo E-mail address: (to be use	oms@bellsouth.net d for future annual report notification)	
For further informa	tion concerning this matter,	please call:	
Ar	ndres Chiriboga	at (305) 24	44-0378
Name	of Contact Person	Area Code & Daytime Tel	ephone Number
Enclosed is a check	for the following amount m	nade payable to the Florida Depar	tment 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 Ad Amendmen Division of P.O. Box 63 Tallahassee	t Section Corporations 327	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl	e

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

SECRETARY OF STATE Pacific Logistics Corp. (Name of Corporation as currently filed with the Florida Dept. of State) P07000088499 (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following

		The
ne must be distinguishable and contain previation "Corp.," "Inc.," or Co.," or the ne must contain the word "chartered," "p	he designation "Corp," "Inc," or	"Co". A professional corpora
Enter new principal office address, if a incipal office address <u>MUST BE A STRE</u>		
Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF		
If amending the registered agent and/or	r registered office address in Fla	orida, enter the name of the
new registered agent and/or the new reg		7104 01101 0110 0100
Name of New Registered Agent:		
New Registered Office Address:	(Florida street addre	ss)
	(City)	, Florida (Zip Code)
	(Cuy)	(Zip Coue)

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>VP</u>	Galo G Chiriboga	14832 SW 149 Ct Miami, Fl 33196	☐ Add☐ Remove
	ding or adding additional Articles, dditional sheets, if necessary). (Be		
	•		
provisi	nendment provides for an exchang ons for implementing the amendment ot applicable, indicate N/A)		

The date of each amendment	(s) adoption:		
• Effective date if applicable:	(date of adoption is required)		
Effective date in appricable.	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/web by the shareholders was/web	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.		
The amendment(s) was/wei	re approved by the shareholders through voting groups. The following statement d 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/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder		
✓ The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder		
Dated	700/11		
Signature			
selec	a director, president or other officer - if directors or officers have not been cted, by an incorporator - if in the hands of a receiver, trustee, or other court pinted (duciary by that fiduciary)		
	Andres Chiriboga		
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		