## P07000101074

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MC

MAR - 5 2012 T. BROWN

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: LOgistic C	are Inc	
DOCUMENT NUMBER: P070001010		
The enclosed Articles of Amendment and fee are su		
Please return all correspondence concerning this ma	atter to the following:	
Clemente Sierra	a	
	Name of Contact Perso	n
Logistic Care In	ıc	
	Firm/ Company	
2500 NW 79 Av	enue Suite 11	6
	Address	
Miami FI 33122	-1075	
	City/ State and Zip Coo	le
E-mail address: (to be us	sed for future annual report	notification)
E-mail address. (to be de	sed for future atmual report	( nouncation)
For further information concerning this matter, pleas	se call:	
Clemente Sierra	at (305	, 877-3198
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	□\$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 Tallahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

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

Logistic Care Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P07000101074

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

to

orp.," "Inc.," or Co.," or the designation "Corp," "In	rporation," "company," or "incorporated" or the ab c," or "Co". A professional corporation name must c
d "chartered," "professional association," or the abbre	viation P.A.
Enter new principal office address, if applicable: incipal office address <u>MUST BE A STREET ADDRESS</u>	Same
Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	<del></del>
	Same
(Mailing address <u>MAY BE A POST OFFICE BOX)</u> If amending the registered agent and/or registered off	fice address in Florida, enter the name of the address:
(Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office new registered agent and/or the new registered office  Name of New Registered Agent	fice address in Florida, enter the name of the address:
(Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office new registered agent and/or the new registered office  Name of New Registered Agent	fice address in Florida, enter the name of the address:

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
l) Change Add Remove			
2) Change Add Remove		_	
3 ) Change Add Remove			
4) Change Add Remove	• • • •		
5) Change Add Remove			
6) Change Add Remove			

E. If amending of ( attach addition	r adding additional Artinal sheets, if necessary).	icles, enter change( (Be specific)	(s) here:		
				,	
******					
<del></del>					
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provisions for	ent provides for an exch Implementing the amer dicable, indicate N/A)	ange, reclassificati ndment if not conta	on, or cancellation sined in the amend	of issued shares, ment itself:	
			·····		
					<u></u>

. The date of each amendment(	s) adoption: January 31, 2012
Effective date <u>if applicable</u> :	March 31, 2012
interive date 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/wer	adopted by the shareholders. The number of votes cast for the amendment(s) re 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	east for the amendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
7	ruary 23, 2012
seld	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 pointed fiducing by that fiducing)
арр	Clemente Sierra
	(Typed or printed name of person signing)
	Vice President
	(Title of person signing)