P08000058333

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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Royal Logistics corp
DOCUMENT NUMBER: P08000 58333
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person
Royal Logistics corp
1009 Park Ceatre Bluch
Mighe Pl. 33169 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address. (to be used for fature annual report notification)
For further information concerning this matter, please call: Variable MASNE at (305) 945 0093 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$\begin{array}{ c c c c c c c c c c c c c c c c c c c
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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A	Articles of Amendmen	t .
	to	
A	rticles of Incorporatio of	on /-//
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royul long	847CS, C	DRP. Becon 10
(Name of Corporation as curren	itly filed with the Florid	a Dept. of State)
P0800005	`& <i>333</i>	ASSE OF C.
(Document Numb	per of Corporation (if kno	wn)
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this F	lorida Profit Corporation adopts the followi
A. If amending name, enter the new name of t	the corporation:	
name must be distinguishable and contain th		The new
B. Enter new principal office address, if application (Principal office address MUST BE A STREET) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC.)	E BOX)	
D. If amending the registered agent and/or re new registered agent and/or the new regist		n Florida, enter the name of the
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	(Florida street d	address)
_		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag		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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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F Ifamen	ding or adding additional Articles, enter	r change(s) here:	
	dditional sheets, if necessary). (Be spec		
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		· · · · · · · · · · · · · · · · · · ·	
			
D 16		-1	
	mendment provides for an exchange, re- ons for implementing the amendment if		
	not applicable, indicate N/A)		
			
		- Tributana	

The date of each amendment(s) adoption:		
· · · · · Effective date <u>if applicable</u> :	(date of adoption is required)	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	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)	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated	12.07.09	
Signature	a distribution provident ashore officers if directors on officers have not been	
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)	
	Vladimiz MASNEV (Typed or printed name of person signing)	
	(Title of person signing)	