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05/16/11--01034--008 \*\*43.75





## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF COR	PORATION:	Beagle Shipping Inc		
DOCUMENT NU	NUMBER: P0900001935			
The enclosed Artic	cles of Amendment and fee ar	re submitted for filing.		
Please return all co	orrespondence concerning this	s matter to the following:		
	Paola Rebellon			
	Name of Contact Person			
	Beagle Shipping Inc			
	Firm/ Company			
	2801 NW 74th Avenue Suite 107			
	Address			
		Miami, FL 33122		
City/ State and Zip Code				
	E-mail address: (to be used	for future annual report notification)		
For further informa	ation concerning this matter, p	please call:		
Pa	ola Rebellon	at (305)55	9-8095	
Name	of Contact Person	at ( 305 ) 55  Area Code & Daytime Tele	phone Number	
Enclosed is a check	k for the following amount ma	ade payable to the Florida Departi	ment of State:	
□ \$35 Filing Fee	☑ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

## **Articles of Amendment** to

`	Articles of Amendment to Articles of Incorporation of	2011 MAY 16 AND
	Beagle Shipping Inc	14.52 B: 58
	(Name of Corporation as currently filed with the Florida Dept. of State)	- CELEVIE
	P-0900001935	N/DA
	(Document Number of Corporation (if known)	

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

	N/A		The
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the dename must contain the word "chartered," "profes	esignation "Ċ	orp," "Inc," or "Co	o". A professional corpor
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)		<u>N/A</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>: BOX</u> )	N/A	
D. If amending the registered agent and/or reg			, enter the name of the
new registered agent and/or the new registe			
	/A		
		da street address)	
Name of New Registered Agent: N.			, Florida (Zip Code)

## 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:

(Attack additional sheets, if necessary)

<u>Title</u>	Name	<u>Address</u>	Type of Action
<u>VP</u>	MIGUEL A TOVAR	5421 SW 162 CT MIAMI, FL 33185	
<u>\$</u>	MIGUEL A TOVAR	5421 SW 162 CT MIAMI, FL 33185	☐ Add ☐ Remove
(attach a	nding or adding additional Articles, additional sheets, if necessary). (Be V Shareholders: This corporation tess of the shareholders is:	specific)	areholders. The name
Ricardo	Tovar (P) 5421 SW 162 Ct.	Miami, FL 33185	Shares (90) 90 %
Miguel A	. Tovar (VP) 5421 SW 162 Ct.	Miami, FL 33185	Shares (10) 10 %
<u>provis</u>	nmendment provides for an exchang ions for implementing the amendm not applicable, indicate N/A)		

The date of each amendmen	t(s) adoption: 04	1/21/2011
, , Effect <del>i</del> ve date <u>if applicable</u> :	04/04/0044	(date of adoption is required)
	(no more than 9	90 days after amendment file date)
Adoption of Amendment(s)	( <u>CH</u>	IECK ONE)
The amendment(s) was/we by the shareholders was/w		shareholders. The number of votes east for the amendment(s) approval.
		ne shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amen	idment(s) was/were sufficient for approval
by	(voting group)	
action was not required.	- ,	e board of directors without shareholder action and shareholder incorporators without shareholder action and shareholder
Dated_04/2 Signature_ (P) el ari	y a pregroup preside	Tent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		Paola Rebellon
	(Ту	ped or printed name of person signing)
		Secretary
	(Title o	f person signing)