P09000010660

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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OCT 1 2 2017 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: Polmar Cargo Inc | | <u>.</u> | | | |
|--------------------------|---|--|--|--|--|--|
| DOCUMENT NUMB | ER: | | | | | |
| | of Amendment and fee are su | bmitted for filing. | | | | |
| Please return all corres | pondence concerning this ma | tter to the following: | | | | |
| | Jesus A Kauam | | | | | |
| • | Name of Contact Person | | | | | |
| | Polmar Cargo Inc. / President | | | | | |
| • | Firm/ Company | | | | | |
| | 10610 NW 123 St Rd., Bay 1 | 01, Medley, Fl, 33178 | | | | |
| • | | Address | | | | |
| | Medley, Fl. 33178 | | | | | |
| | City/ State and Zip Code | | | | | |
| nalma | r@grupovenamek.com | | | | | |
| | | sed for future annual report | notification) | | | |
| | | | , | | | |
| For further information | concerning this matter, pleas | se call: | | | | |
| Jesus A Kauam | | at (| 7268815 | | | |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number | | | |
| Enclosed is a check for | the following amount made | 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) | | | |
| Ame Divi P.O. | ting Address Indment Section Ission of Corporations Box 6327 Ishassee, FL 32314 | Amend Divisio Clifton 2661 F | Address Iment Section on of Corporations Building Executive Center Circle assee, F1, 32301 | | | |

Articles of Amendment to Articles of Incorporation of

| Polmar Cargo Inc | | |
|---|-----------------------------|---|
| (Name o | of Corporation as curren | tly filed with the Florida Dept. of State) |
| P0900010660 | | |
| | (Document Number | of Corporation (if known) |
| Pursuant to the provisions of section 607, its Articles of Incorporation: | 1006, Florida Statutes. thi | s Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new na | ame of the corporation: | |
| n/a | | The new |
| | nation "Corp," "Inc," or | ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the |
| B. Enter new principal office address | if annlicable: | Jesus A Kauam |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | | 10610 NW 123 St Rd. Bay 101 , |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | Medley, Fl. 33178 |
| | | 10610 NW 123 St. Rd. Bay 101 |
| | | Medley, Fl. 33178 |
| | | |
| D. If amending the registered agent an new registered agent and/or the new | | |
| Name of New Registered Agent | Jesus A Kauam | |
| Manie of Men Registered Agent | 10610 NW 123 St. Rd. H | |
| | | street address) |
| N D : 1000 111 | Medley, | 33178 |
| New Registered Office Address: | | (City) , Florida (Zip Code) |
| | | |
| | | , |
| New Registered Agent's Signature, if c | hanging Registered Ager | <u>11:</u> |
| I hereby accept the appointment as regis. | tered agent. I am familia | r with and accept the obligations of the position. |
| | Signatura of Vino | Revistered Avent, if changing |
| | ovadaue a wew | NERIMETCA AVEIL A CHARVINY |

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 | PT John | <u>1 Doe</u> | |
|-------------------------------|---------------------|-----------------|------------------|
| X Remove | <u>Y</u> <u>Mik</u> | <u>e Jones</u> | |
| X Add | SV Sall | y Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change | Director | Susana, Octavio | 846 NW 104 Av. |
| Add | | | Miami, Fl, 33172 |
| X Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| - | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) |
|--|
| n/a |
| ma — — — — — — — — — — — — — — — — — — — |
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| F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) |
| N/A |
| |
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| The date of each control decree 400 | 10/04/2017 | if ashur shan sh |
|--|---|--------------------------------|
| The date of each amendment(s) date this document was signed. | adoption: | , if other than th |
| - | 0/04/2017 | |
| Effective date <u>if applicable</u> : | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in thi document's effective date on the | s block does not meet the applicable statutory filing requirements, this Department of State's records. | date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| ☐ The amendment(s) was/were by the shareholders was/were | idopted by the shareholders. The number of votes cast for the amendme sufficient for approval. | nt(s) |
| ☐ The amendment(s) was/were a must be separately provided. | approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s): | ement |
| | ist for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| • | (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 | |
| 10/04/20 Dated | 17 | |
| Signature | | |
| sele | a director, president or other officer – if directors or officers have not be sted, by an incorporator – if in the hands of a receiver, trustee, or other cointed fiduciary by that fiduciary) | |
| | Jesus A Kauam | |
| | (Typed or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |