## P10000069476

(Compostario Norma)
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Sashioso Ellary Harrio)
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

27632 0/22v

## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: WORLD	CARGO + EXPARI. CORP.
DOCUMENT NUMBER: P100000	,9476
The enclosed Articles of Amendment and fee are su	abmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
MARIA & Flein	of Contact Person
WORLL CARGO FI	TM Company
4759 NW 72 1	906 Address
Miami F City/S	1 3 3/4 C tate and Zip Code
SERVICAR GAMIA/ E-mail address: (to be used for	u; Q VAI+00. co M.  future annual report notification)
For further information concerning this matter, plea	se call:
MARIA ELGNA Floifos  Name of Contact Person	at ( 308 ) 8/2 - 5969  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Department of State:
\$35 Filing Fee \$\times \text{\$43.75 Filing Fee & Certificate of Status}	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	· · · · · · · · · · · · · · · · · · ·

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

on (if known)  es, this Florida Profit Corporation adopts the following  1:
<u>ı:</u>
The new poration," "company," or "incorporated" or the prp," "Inc," or "Co". A professional corporation tion," or the abbreviation "P.A."
6133 3W 44 Terr
Migni DI 3315 ALED  FILED  Address in Florida, enter the name of the ress:
<del> </del>
da street address)
, Florida
(Zip Code)  Lent:  liar with and accept the obligations of the position.  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)

Title.	<u>Name</u>	Address	Type of Action
<u> </u>			□ Damaua
			☐ Add ☐ Remove
	<del></del>		
	ding or adding additional Artic additional sheets, if necessary).		
provis		ange, reclassification, or cancellad diment if not contained in the am	

The date of each amendment	(s) adoption: 8-26-2010 (date of adoption is required)
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer 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 of 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.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wei action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	8.26-10
(By	a director, president exother officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court
	ointed fiduciary by that fiduciary)
	MARIAE Fleifes.  (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	Prosident
	(Title of person signing)