P1000076986

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL.			
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(Document Number)					
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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE **Division of Corporations**

February 3, 2011

JEREMY D. BOWERS LOGISTICS CONSULTING GROUP, INC. 9183 NW 40TH PL SUNRISE, FL 33033

SUBJECT: LOGISTICS CONSULTING GROUP, INC.

Ref. Number: P10000076986

, Check for \$55,00 already deposited

We have received your document for LOGISTICS CONSULTING GROUP, INC. and your check(s) totaling \$55.00.) However, the enclosed document has not been filed and is being returned for the following correction(s):

THE ABOVE ENTITY IS A FLORIDA CORPORATION AND THE FORM SUBMITTED IF FOR A FLORIDA LIMITED LIABILITY COMPANY.

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (**85**0) 245€6880.

Karen Gibson Decument Specialist Supervisor

Letter Number: 911A00002927

www.sunbiz.org

COVER LETTER

	TO: Amendment Section Division of Corporations						
	NAME OF CORPORATION: Logistics Consulting Group, Inc.						
)	DOCUMENT NUMBER: P10000076986						
	The enclosed Articles of Amendment and fee are submitted for filing.						
	Please return all correspondence concerning this matter to the following:						
	Jeremy Bowers Name of Contact Person						
	Logistics Consulting Group, Inc.						
	9183 NW 40th PL Address						
	Address						
	Sunnse, FL 33351						
	only of the and and any of the						
	Jowers @ Icglift.com E-mail address: (to be used for future annual report notification)						
	2-mail address. (to be used for future annual report notification)						
	For further information concerning this matter, please call:						
	Teremy Bowers at (305) 878,9208 Name of Contact Person Area Code & Daytime Telephone Number						
	Med K for						
	Enclosed is a check for the following amount made payable to the Florida Department of State:						
	S35 Filing Fee Scrifficate of Status S2.50 Filing Fee Scriffied 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 Pared Feb 3 RD Tallahassee Teb 3 RD Ta						

Articles of Amendment to Articles of Incorporation

of

	Logistics Consulting Group, Inc.				
	(Name of Corporation as currently filed with the Florida Dept. of State)				
	(Document Number of Corporation (if known)				
o	Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:				
>	A. If amending name, enter the new name of the corporation:				
	The new				
	name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation is mame must contain the word "chartered," "professional association," or the abbreviation "P.A."				
P	B. Enter new principal office address, if applicable:				
	(Principal office address MUST BE A STREET ADDRESS)				
	PSE T				
_	AR E				
rO	C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
	(Mulling address MAT BE A FOST OF FICE BOX)				
	OF STATE				
>					
	D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:				
	Name of New Registered Agent:				
	New Registered Office Address: (Florida street address)				
	, Florida				
	· (City) (Zip Code)				
)	New Registered Agent's Signature, if changing Registered Agent:				
	hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.				
	Signature of New Registered Agent, if changing				

(Attach additional sheets, if necessary) Name Type of Action Jereny D. Bowers 9183 NW 40th PL Add Suncise, FL 33351 - Remove ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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)

' 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:

The date of each amendment(s) ac		2.14.11	B) 1.9.201
Effective date if applicable:	2141160	idoption is required	1.9.2011
, (no	more than 90 days after	amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su		rs. The number of votes cas	t for the amendment(s)
The amendment(s) was/were approvided for			
"The number of votes cast f	or the amendment(s) wa	as/were sufficient for approv	/al
by	· - · <u>- · · - · · · · · · · · · · · · ·</u>	.,,	,
(voti	ng group)		
The amendment(s) was/were add action was not required. The amendment(s) was/were add action was not required.	,		
Dated 2.14 Signature (By a direselected,	ector, president or other	officer – if directors or officin the hands of a receiver, triary)	
Manuel	(Typed or printe	ed name of person signing)	
	(Title of person sign	ning)	