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EFFECTIVE DATE

2/1/2012

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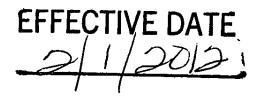
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: OSCEOIA O	Outdoor Services Inc.		
DOCUMENT NUMBER: P100000772			
The enclosed Articles of Amendment and fee are s	submitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
Bonnie Hayes			
	Name of Contact Person		
Osceola Outdoo	r Services/Auto Logistics Inc.		
 	Firm/ Company		
2950 Canoe Circ	cle		
**************************************	Address		
Saint Cloud,FL 3	34772		
	City/ State and Zip Code		
bonniehayes26@ho	tmail.com		
	used for future annual report notification)		
D-mail address. (to be a	in this which report nonnealion,		
For further information concerning this matter, plea	ase call:		
Bonnie Hayes	at (407) 908-1958		
Name of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount made	e payable to the Florida Department of State:		
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is S52.50 Filing Fee Certificate of Status Certified Copy		
enclosed)	(Additional Copy		
	is enclosed)		
Mailing Address	Street Address		
Amendment Section	Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327 Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		

Articles of Amendment to Articles of Incorporation of



Osceola Outdoor Servic	es Inc			
(Name of Corporation a	s currently filed with the Flo	orida Dept. of State	2)	_
P10000077218				
(Docume	nt Number of Corporation (if	known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this F	lorida Profit Corpo	ration adopts the following	ng amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
Auto Logistics Inc.				The new
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	'o". A professiona	"incorporated" or the a l corporation name must	 ibbreviation contain the
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable: TREET ADDRESS)			_
C. Enter new mailing address, if appl		2950 Cano	oe Circle	_
(Mailing address <u>MAY BE A POST</u>	<u>OFFICE BOX</u>)		d,FL 34772	_
				_
D. If amending the registered agent as new registered agent and/or the ne	nd/or registered office addre w registered office address:	ss in Florida, ente	r the name of the	7
Name of New Registered Agent	NIA			ASSOCIATION CO.
	2950 Canoe Circ	cle		7 937
	(Florida stree	· · · · · · · · · · · · · · · · · · ·	<u>, , ,</u>	
New Registered Office Address:	Saint Cloud		Florida 34772	E PORSI
New Registered Office flauress.	(City)		(Zip Code)	PH 1: 24
New Registered Agent's Signature, if a lareby accept the appointment as regis	tered agent. I am familiar wi		bligations of the position.	
S	ignature of New Registered Ag	geni, ij cnanging		

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	<u>PT</u>	<u>John Doe</u>	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove		N/A	
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)
WA We would like to change the name of our Company from Osceola Outdoor Services "to Auto Logistics Inc.
Company from Osceola Outdoor Services "to
Auto Logistics Inc
in the contract of the contrac
4
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
,

The date of each amendment(s) adoption: 124 12
Effective date if applicable: 2/1/12
Effective date if applicable: (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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
(voling group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
_{Dated} 1/24/2012
Signature Bonniettages
(By a director, president or other officer - if directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Bonnie Hayes
(Typed or printed name of person signing)
President
(Title of person signing)