P100000 85394

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SECRETARY OF STATE

AUG 2 2016

C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: K and C Carrier Lo	gistics, Inc	
DOCUMENT NUM	BER: P10000085394		
	of Amendment and fee are sul	bmitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	Katherine Rodriguez		
		Name of Contact Persor	l
	K and C Carrier Logistics, Inc	ε	
		Firm/ Company	
•	10400 NW 21 Street, STE 11	• •	
		Address	
	Doral, FL 33172		
		City/ State and Zip Code	
kathe	erinerodriguez@kc-logistics.ne	t	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	at (305	, 4093826
Name	of Contact Person	at (Area Co	de & Daytime Telephone Number
	or the following amount made		•
□ \$35 Filing Fee	S43.75 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)
Am Div P.C	iling Address endment Section rision of Corporations b. Box 6327 lahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assec, FL 32301

Articles of Amendment to Articles of Incorporation of



K and C Carrier Logistics, Inc

	atly filed with the Florida Dept. of State)
P10000085394	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation: N/A	The new
name must be distinguishable and contain the word "corporat" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	10400 NW 21 Street, STE 115
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Doral, FL 33172
	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10400 NW 21 Street, STE 115
	Doral, FL 33172
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
Name of New Registered Agent N/A	
(Florida s	street address)
New Registered Office Address: N/A	. Florida
Her Registered Office Address.	(City) (Zip Code)
	• •
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familian	
Signature of New	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)

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>	John Doe	
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	<u>v</u>	Yeiny Alexandra Casallas Avila	23751 SW 106 Place
X Add			Homestead, FL 33032
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		.	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
If an amount and a state for a	
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nament if not contained in the amendment users
• • •	ange to 10 shares. Yeiny Alexandra Casallas Avila is buying 70 percent of
Total of the original to the original o	sings to to states. Terry Modulate Casallas Avita is onlying to percent of
npany shares. Therefore, Yeiny Alexand	dra Casallas will have 7 shares. Katherine Rodriguez will have 3 shares.
1774	
	

The date of each amendment(s) a	doption:	,	if other than the
late this document was signed.		FILE SECRETARY SIVISION OF CO	U OF STATE REGRATION
Effective date <u>if applicable</u> :	(ve week to our OO down of few own and Ole down		
	(no more than 90 days after amendment file date)	2016 JUL 25	PM 12: 44
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, epartment of State's records.	this date will not	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amen ufficient for approval.	dment(s)	
	proved by the shareholders through voting groups. The following reach voting group entitled to vote separately on the amendment		
"The number of votes cas	t for the amendment(s) was/were sufficient for approval		
by			
	(voting group)		
☐ The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and sha	areholder	
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareho	older	
July 18, 20	016		
Dated Signature <u> </u>	williat of		
(By a select	director, president or other officer – if directors or officers have noted, by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)		
	Katherine Rodriguez		
	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		