## P1000085398

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Global Logistics Solutions, Inc. DOCUMENT NUMBER: P10000085398 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Shuaib Khan Name of Contact Person Global Logistics Solutions, Inc. Firm/ Company 937 NW 201 Ave. Address Hollywood, FL 33029 City/ State and Zip Code skhan@eerpsolutions.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (813) 477-2170

Area Code & Daytime Telephone Number Shuaib Khan Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is 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

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## **Articles of Amendment Articles of Incorporation** of

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## Global Logistics Solutions, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

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(Documer	nt Number of Corporation (	if known)	•	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corp	oration adopts the following	amendmen
A. If amending name, enter the new na	ime of the corporation:			
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A profession		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		10219 NV	V 53rd Street	
		Sunrise, FL 33351		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		937 NW 2	01 Ave.	
		Hollywood, FL 33029		
D. If amending the registered agent an new registered agent and/or the new			er the name of the	
Name of New Registered Agent	937 NW 201 Av			
		reet address)		
New Registered Office Address:	Hollywood	ŕ	, Florida 33029	
Hen Megistered Office Mucress.	(City,	)	(Zip Code)	
New Registered Agent's Signature, if c	ered agent. Jam familiar	with and accept the o	obligations of the position.	
Sig	gnature 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 <math>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.

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) X Change	Р	Shuaib Khan	937 NW 201 Ave.
Add			Hollywood, FL 33029
Remove			
2) Change	<u>V</u>	Ghousia Khan	937 NW 201 Ave.
X Add			Hollywood, FL 33029
Remove 3) Change	Р	Roshan Haque	30200 LETTINGWELL CIRCLE
Add	<del>,</del>		TAMPA, FL 33543
X Remove			
4) Change			
Add			
Remove			
5) Change		<del></del>	
Add			
Remove			·
6) Change			· · · · · · · · · · · · · · · · · · ·
Add			
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If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
<del></del>	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument is not contained in the amendment isen.
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	<del> </del>
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The date of each amendment(s) adoption: July 1st, 2013	, if other than the
date this document was signed.  Letter this document was signed.  July 1st, 2013  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"  (voting 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.	
July 1st, 2013	
Signature	
(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)	
Shuaib Khan	
(Typed or printed name of person signing)	_
President / CEO	

(Title of person signing)