P11000013814

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STATE OF CORPORATION OF CORPORATION

JAN 30 2017

C LEWIS

\$ 850-245-6014

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LIL LOGISTICS LINC					
DOCUMENT NUMBER: P110000 13814					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Barbara Syman letz Name of Contact Person					
LTL Logistics Juc					
PUBUX 380 LES					
Murdock FL 33938					
City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
E-mail address. (10 bejused for theore animal report notification)					
For further information concerning this matter, please call: Syman e 743 340 - 0563 Name of Contact Person Area Code & Daytime Telephone Number					
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee Certificate of Status Certificate of Status (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed)					
Mailing Address Amendment Section Amendment Section					

Division of Corporations

Tallahassee, FL 32314

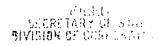
P.O. Box 6327

Please call me for Credit Card Phone payment 743-340-0562

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building



Articles of Amendment to

2017 JAN 24 PM 12: 33

Articles of Incorporation

LIE DOGISTICS CINC
(Name of Corporation as currently filed with the Florida Dept. of State)
P11000013814
(Document Number of Corporation (if known)
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 name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Part Charlo He FL
33952
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) POBOX 380188 MWCOCK FL 22938
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 1018 Kensix ton St 1018 Kensix ton St
New Registered Office Address: Part Charlotte , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I have by accept the appointment as registered agent. I have by accept the appointment as registered agent. I have by accept the obligations of the position.

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) 1) Change Add Remove	Title	Name BP Todd Symanietz	Address 1018 Kensingtm8 Port Charlotte FL 33952
2) Change Add Remove			
3) Change Add Remove	<u></u>		
4) Change Add Remove			
5) Change Add		<u> </u>	
Remove 6) Change Add Remove			

	(Be specific)
f an amendment provides for an excl	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) adoption: _	1-10-17	A CRETARY	Ofif other than the
date this document was signed. Effective date if applicable:	(no more than 90 days after amend	2017 JAN 24	PH 12: 33
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filin	• ,	not be listed as the
Adoption of Amendment(s) he amendment(s) was/were adopted by the by the shareholders was/were sufficient for		east for the amendment(s)	
☐ The amendment(s) was/were approved by t must be separately provided for each votin			
. by <u>Barbara Syme</u>	endment(s) was/were sufficient for appearance of the control of th	<u></u>	
e amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder ac	tion and shareholder	
selected, by an inc	estlent or other officer – if directors or corporator – if in the hands of a receiver by that fiduciary) (Typed or printed name of person significant control of the contr	er, trustee, or other court	
	(Title of person signing)		