# P11000016358

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(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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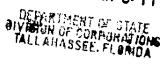
TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: SWIFT CA	RGO, INC	
DOCUMENT NUMBER: P1100001635	58	
The enclosed Articles of Amendment and fee are su		
Please return all correspondence concerning this ma	itter to the following:	
MARITZA PALOI	MO	
<del></del>	Name of Contact Person	ı
SWIFT CARGO,	INC	
	Firm/ Company	
1625 SW 67th A	√E	
	Address	
MIAMI, FL 33155	5	
	City/ State and Zip Code	•
tramiplus@gmail.cor	n	
E-mail address: (to be us	sed for future annual report	notification)
For further information concerning this matter, pleas	se call:	
MARITZA PALOMO	at (305	6398630
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee □\$43.75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301



RECEIVED 13 MAR -4 AM 8: 11



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 19, 2013

MARITZA PALOMO SWIFT CARGO, INC 1625 S.W. 67TH AVE. MIAMI, FL 33155

SUBJECT: SWIFT CARGO, INC Ref. Number: P11000016358

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

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 (850) 245-6050.

Darlene Connell Regulatory Specialist II

Letter Number: 313A00004021

February 25, 2013

TO: FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATION P.O.BOX 6327 TALLAHASSEE, FL 32314

FROM: CLAUDIA BOLADERES DE LA PAZ EX-OWNER TRAMI PLUS, INC.

Hereby I want to report that I have no intention to revoke the dissolution of my old company (TRAMI PLUS, INC.), for which I give permission to release the name of my company to another entity.

No other issue, I sign this for the record,

Claudia Boladères De La Paz Ex-Owner, TRAMI PLUS, INC.

PHONE: (305) 741-9353

MARITZA PALOMO

IY COMMISSION # EE202273 EXPIRES May 28, 2016

FloridabliotaryService com

#### Articles of Amendment to Articles of Incorporation of

# FILED

## SWIFT CARGO, INC

2013 MAR -4 AM IN 46

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

(Document Number of Corporation (if known)

P11000016358

SECRETARY OF STATE TALLAHASSEE, FLORIDA

	rsuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> Articles of Incorporation:	oridu Profit Corporation adopts the follow	ing amendment(s) to
	If amending name, enter the new name of the corporation: RAMI PLUS, CORP.		The new
"C	me must be distinguishable and contain the word "corporation." orp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co rd "chartered." "professional association." or the abbreviation "P.:	". A professional corporation name mus	abbreviation t contain the
	Enter new principal office address, if applicable: incipal office address <u>MUST BE A STREET ADDRESS</u> )	N/A	
			1,000
C.	Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	water to
			<del></del>
D.	If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the	<del></del>
	Name of New Registered Agent N/A		

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

I 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

(Florida street address)

(City)

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		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Nan</u>	<u>ne</u>	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add	***************************************			
Remove				The state of the s
3) Change				
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Add				
Remove				
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Remove				
5) Change	<del></del>			
Add				
Remove				
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Add				
Damova				

E. If amending or adding additional sheets, if n	tional Articles, enter	change(s) here:		
	ecessary). (Be spec	ijic)		
N/A				
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		<del>.</del>	<del></del>	
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Tradition is a superior of the description of the d	u <sub>1</sub>			
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			- <u></u> ,	
<ul> <li>If an amendment provides f provisions for implementing</li> </ul>	or an exchange, recl	assification, or cand	ellation of issued sh	iares,
(if not applicable, indica	g the amendment n	not contained in the	amenument usen.	
• •	<i>ac</i> 111.11			
N/A				
		the state of the s		
		<del></del>		
	<u> </u>			

The date of each amendment(s) adoption: 02/11/2013			
Effective date <u>if applicable</u> :			
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.		
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):		
"The number of votes case	for the amendment(s) was/were sufficient for approval		
by	(voting group)		
	(voting group)		
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder		
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder		
<sub>Dated</sub> 02/11/	2013		
Signature	el Botonial		
(By a c	director, president on other officer – if directors or officers have not been ed by an incorporator – if in the hands of a receiver, trustee, or other court sted fiduciary by that fiduciary)		
	MARITZA PALOMO		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		