P110000 42245

(Re	equestor's Name)			
(Ad	ldress)			
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(Ci	ty/State/Zip/Phone	e #)		
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SECRETARY OF STATE
TALL AND SEED FLORIDA

AUG 1 8 2015

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: INVESTMENT LOGISTIC SOLUTION COYP
OCUMENT NUMBER: P110000 42245
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lorena Lizarralde Name of Contact Person
Secure Accounting Inc
Firm/ Company
4733 SW 143 Ave Address
Miami F7 32175
Miami, FL 33175 City/ State and Zip Code
lorena. secure @gmail.com
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
Lorena Lizarralde at 186, 6194149
Name of Contact Person Area Code & Daytime Telephone Number
inclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status (Additional Copy is enclosed)
Mailing Address Amendment Section Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

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Investment Lo	alistic (Solution Cor	P	
(Name of Corporatio	n as currently	filed with the Florida Dep	ot. of State)	
P11 000	042248	5		
(Docume	ent Number of C	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this <i>F1</i>	orida Profit Corporation a	adopts the follow	ring amendment(s) to
A. If amending name, enter the new name of the cor	poration:			
N	I A			The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp,' word "chartered," "professional association," or the a B. Enter new principal office address, if applicable:	' "Inc," or "Co	o". A professional corpor	porated" or the ration name mus	abbreviation
(Principal office address <u>MUST BE A STREET ADD</u>)	RESS)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX D. If amending the registered agent and/or registered new registered agent and/or the new registered of	d office addres	N/A	me of the	
	N 1 4	4		
Name of New Registered Agent	/\/			SEC
New Registered Office Address: New Registered Signature, if changing Regis	·	t address) } ity)	_, Florida(Zij	THE DESTATE AND A PROBLEM OF STATE ORIDA
I hereby accept the appointment as registered agent. I	am familiar wit	h and accept the obligation	ns of the position	ı.
Signa	MA ture of New Reg	ristered 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	PT	John D	<u>oe</u>	
X Remove	<u>v</u>	Mike J	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP	_	ILS cargo Express	6701 NW 75+ Ste 135
Add				Micimi FL 33126
Remove				
2) Change		_		
Add				
Remove				- 5
3) Change		<u> </u>		AUG.
Add				= (2년 - 1년 - 1년
Remove				
4) Change	 .			OF STATE ORIDA
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)		
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	in B	
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	구	<u> </u>
	PN 12: 44	17.07
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	<u>_</u>	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	-	D.K.
(ly not applicable, indicate N/A) N A		
		 _

		·		
The date of each amendment(s date this document was signed) adoption: 8 13/15	if other tha	in the	
Effective date if applicable:	(no more than 90 days after amena	dmens file date)		
Note: If the date inserted in the document's effective date on the	us block does not meet the applicable statutory filing Department of State's records	ng requirements, this date will not be listed of	as the	
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes or sufficient for approval.	east for the amendment(s)		
	approved by the shareholders through voting groups for each voting group entitled to vote separately on			
"The number of votes	cast for the amendment(s) was/were sufficient for ap	proval		
by	(roling group)			
The amendment(s) was/were action was not required.	adopted by the board of directors without sharehold	der action and shareholder		
The amendment(s) was/were action was not required	adopted by the incorporators without shareholder ac	ction and shareholder		
Dated <u> </u>	119/15		15 AUG	SECRE
sel	y a director, preside it if other officer — if directors of lected, by an incorporator — if in the hands of a receiv pointed fiduciary by that fiduciary)			
	JOTOR) U.S. APCY (Typed or printed name of person signal)+C	PH I2:	0F ST
	VICE President (Title of person signing)	<u> </u>	£	ATE PRIDA

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