P11000047290

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Fast Envios, Inc.
DOCUMENT NUMBER: P11000047290
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Omar Carvajal
Name of Contact Person
Fast Envios, Inc.
Firm/ Company
6965 SW 117 AVE
Address
Miami, FL 33183
City/ State and Zip Code
omarhcarvajal@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Robert McConnell CPA at (305) 595-1809
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 Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Fast Envios, Inc.

14 AUG 25 PM 1: 02

(Name of Corporation as currently filed with the Florida Dept. of State) P11000047290 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (Florida street address) New Registered Office Address: Florida (City) New Registered Agent's Signature, if changing Registered Agent: 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

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>	Name	<u>Addres</u> s
1) Change	DP	Omar Carvajal	9737 NW 41 St Ste 128
Add			Doral, FL 33078
Remove			
2) Change	<u>P</u>	Carlos Alberto Valderrama	6965 SW 117 Ave
Add			Miami, FL 33183
Remove			
3) Change	V	Daniel Romero	6965 SW 117 Ave
✓ Add			Miami, FL 33183
Remove			
4) Change	ST	Omar Carvajal	6965 SW 117 Ave
Add			Miami, FL 33183
Remove			
5) Change			
Add			- 4
Remove			
6) Change			
Add			
Remove			

	adding additional Ar al sheets, if necessary).	. (Be specific)			
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f an amendme	nt provides for an ex	change, reclassif	ication, or cance	llation of issued s	hares,
provisions for	implementing the andicate N/A)	nendment if not o	contained in the a	mendment itself	<u> </u>
(ij noi upp	ilcubie, malcale N/A)				

The date of each amendment(s) ac date this document was signed.	loption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	proved by the shareholders through voting groups. The following statement 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 add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were addaction was not required.	opted by the incorporators without shareholder action and shareholder	
Dated		
Signature		
selected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	Omar Carvajal DMAR CARVAJAL	
	(Typed or printed name of person signing) Treasurer	