## P12000015609

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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03/12/12--01011--024 \*\*43.75



C. MUSTAIN

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: BONALDE	S LOGISTICS II	NC
	BER: P1200001560		
	of Amendment and fcc are su		•
Please return all corre	spondence concerning this ma	atter to the following:	
	RAMON BONAL	DE	
		Name of Contact Perso	n
	BONALDES LOG		<b></b>
		Firm/ Company	<del></del>
	1770 92ND ST U	INIT 5-307	
		Address	<u> </u>
	<b>WEST DES MOI</b>	NES IA 50266 U	IS
		City/ State and Zip Cod	e
**************************************	E mail address. (to be u	sed for future annual report	
	E-man address. (to be d	sed for future annual report	Hourication)
For further information	n concerning this matter, plea	se call:	
	<b></b>		
RAMON BOI	NALDIS	at (954	, <del>4</del> 613919
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
_		_	_
□ \$35 Filing Fee	■\$43.75 Filing Fee &	□\$43.75 Filing Fee &	□\$52.50 Filing Fee
	Certificate of Status	Certified Copy (Additional copy is	Certificate of Status
		(Additional copy is enclosed)	Certified Copy (Additional Copy
		chclosed)	is enclosed)
Mai	ling Address	Street	Address
	endment Section	100	ment Section
Division of Corporations		Division of Corporations	
	Box 6327		Building
Talla	ahassee, FL 32314	2661 E	xecutive Center Circle

Tallahassee, FL 32301



March 28, 2012

RAMON BONALDE 1770 92ND ST., UNIT 5307 WEST DE MOINES, IA 50266

SUBJECT: BONALDES LOGISTICS INC

Ref. Number: P12000015609

We have received your document for BONALDES LOGISTICS INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

The signature page is for a non profit corporation.

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.

Carol Mustain Regulatory Specialist II

Letter Number: 912A00010371

	, Articles of Am	endment	
	to Articles of Inco		A S
•	of	i poration	24
BONALDES LOGISTICS	SINC		APR F
(Name of Corporation a	s currently filed with the Flo	orida Dept, of State)	- Kill 6
P12000015609			PH
(Docume)	nt Number of Corporation (if	known)	P::2:
Pursuant to the provisions of section 607, ts Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation adopts, th	e following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
BONALDE'S LOGISTICS	SINC		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	o". A professional corporation ne	or the abbreviation
B. Enter new principal office address,	if annlicable	1770 92ND ST UNIT	#5307
Principal office address <u>MUST BE A S</u>		WEST DES MOINES IA 50	)266 US
C. Enter new mailing address, if appli (Mailing address MAY BE A POST	icable: OFFICE BOX)	9455 BOCA GARDEN CIRC S	SOUTH A
		BOCA RATON FL 3	3498
D. If amending the registered agent an		ss in Florida, enter the name of th	l <u>e</u>
new registered agent and/or the new		7	
Name of New Registered Agent	WALTER GOME		
	508 SW PORT S	T LUCIE BLVD	
	(Florida stree	•	
New Registered Office Address:	PORT ST LUCIE	, Florida	
	(City)	(Zip	o Code)
New Registered Agent's Signature, if c			
hereby accept the appointment as regist		th and accept the obligations of the	position.
•			
Siz	gnature of New Registered Ag	ent, 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.

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>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	P	YURY BONALDE	9455 BOCA GARDEN CIRC SOUTH A BOCA RATON FL 33498
2) Change Add Remove	<u>P</u>	RAMON BONALDE	9455 BOCA GARDEN CIRC SOUTH A BOCA RATON FL 33498
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			41
6) Change Add Remove		<del></del>	

( attach additional sheets, if necessary). (Be specific)
Currently Yury Bonalde is listed as the P. There is a change,
Yury Bonalde leaves the corporation, Ramon Bonalde is named the P.
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**************************************
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate $N/A$ )  N/A  .
•

The date of each amendment	(s) adoption: 03/06/2012
Effective date if applicable:	03/07/2012
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/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by YURY BO	NALDE "
-, <u></u>	(voting group)
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
	06/2012
ď)	by a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court
	opointed fiduciary by that fiduciary)
	YURY BONALDE
	(Typed or printed name of person signing)
	P
	(Title of person signing)