P12000025854

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SECRETARY OF STATE

APPROVED AND FILED

C. LEWIS

OCT 2 1 2013

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corpo	rations				
	ATION: LEMON LO		PORATION		
DOCUMENT NUMB	ER: P1200002585	4	 		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this matter to the following:					
,	JANE MAIA				
	Name of Contact Person DUVEKOT CORPORATION				
Firm/ Company 200 S ANDREWS AVENUE - SUITE 101					
-	FORT LAUDERDALE, FL 33311				
City/ State and Zip Code ADMIN@DUVEKOT.COM E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
JANE MAIA		at (305	716-9775		
Name o	f Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
S35 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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Articles of Amendment to Articles of Incorporation of

APPROVED
AND
FILED

13 OCT | RM |: 38

SECRETARY OF STATE
TALLAHASSEE FLORIDA

LEMON LOGISTICS CORPORATION

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

P12000025854	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "i	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	And the second second
D. If amending the registered agent and/or registered office addr	
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address: (City)	, Florida(Zip Code)
: :	(Σφ τουε)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Registered A	gent, 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 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) X Change	S,T	RENE C. DUVEKOT	200 S ANDREWS AVENUE - SUITE 101	
Add			FORT LAUDERDALE, FL 33301	
Remove				
2) Change	V	DUVEKOT CORPORATION	200 S ANDREWS AVENUE - SUITE 101	
X Add	1.2.11 TO THE		FORT LAUDERDALE, FL 33301	
Remove				
3) Change	D	AMILCAR GAZANIGA JR.	200 S ANDREWS AVENUE - SUITE 101	
X Add			FORT LAUDERDALE, FL 33301	
Remove				
4) Change	D	RENE C. DUVEKOT	200 S ANDREWS AVENUE - SUITE 101	
X			FORT LAUDERDALE, FL 33301	
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)
"Officer/Director Detail" SHALL BE AS FOLLOW:
P. D: FABRIZIO PETECOF
V: DUVEKOT CORPORATION
D.S.T: RENE C. DUVEKOT
D: AMILCAR GAZANIGA JR.
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)
(ly not approxime, mandae 1874)

		APPROVED
The date of each amendment(s) ad date this document was signed.	option:	, if other filed
Effective date <u>if applicable</u> :		- 13 007 11 PM .
	(no more than 90 days after amendment file date)	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Adoption of Amendment(s)	(CHECK ONE)	TE. FLORIDA
■ The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendm fficient for approval.	
	roved by the shareholders through voting groups. The following sta- each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopaction was not required.	pted by the board of directors without shareholder action and sharel	holder
☐ The amendment(s) was/were adopaction was not required.	pted by the incorporators without shareholder action and shareholder	er
_{Dated} 10/01	/2013	
Signature Z	Aulation D	
(By a di selected	rector, president or other officer / If directors or offisers have not be an incorporator if in the hands of a receiver, trustee, or other ed fiduciary by that fiduciary)	
	FABRIZIO PETECOF	
•	(Typed or printed name of person signing)	

PRESIDENT

(Title of person signing)