P12000032478

(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORAT	TON: FRP Robay	/na Enterprises,	Inc.
DOCUMENT NUMBER	: P1200003247	8	
The enclosed Articles of A			
Please return all correspor	dence concerning this ma	tter to the following:	
Fe	eliciano Robayn	a	
		Name of Contact Person	
U	nited Logistics E	Belize, Ltd.	
		Firm/ Company	
P	O Box 0302007	80	
		Address	
· C	olon Free Zone	, Republic of Par	nama
. 		City/ State and Zip Code	,
frprob	oayna@gmail.co	om	
		sed for future annual report	notification)
For further information co	ncerning this matter, pleas	se call:	
David McDonal	d	at (305	643-5313
Name of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check for the	e 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)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendr Division P.O. Bo	Address nent Section n of Corporations x 6327 ssee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

GRBIVI Enterprise, Inc.		_
(Name of Corporation as currently filed with the F	Clorida Dept. of State)	
P12000032478		_
(Document Number of Corporation (i	if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the corporation:		
FRP Robayna Enterprises, Inc.		The new
name must be distinguishable and contain the word "corporatio" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	'Co". A professional corporation name musi	abbreviation contain the
B. Enter new principal office address, if applicable:	(no change)	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		_
		_
		_ び
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	(no change)	- 13 E 29 E
		_ = %
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ress in Florida, enter the name of the	
Name of New Registered Agent (no change)		
Name of New Registered Agent V		
Elavida et	reet address)	
(no change)		
New Registered Office Address: (no change) (City)	, Florida	_
Teny	(Eip Couc)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	<u>t:</u> with and accept the obligations of the position	ı.
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.

X Change	PT	John Doc	
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	V	Buglione, Giorlenys R.	605 Riviera Dr.
Add			Fort Lauderdale, FL 33301
X Remove			
2) Change	V	Robayna, Lucette Marie	605 Riviera Dr.
X Add			Fort Lauderdale, FL 33301
Remove			
3) Change	 		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Ch.			
6) Change			
Add			
Remove			

E. If amending or adding (Attach additional sheets	additional Artic	les, enter change (Be specific)	e(s) here:		
	, ij necessury).	(be specific)			
N/A					
 					
					
					
	 :	_ -		- -	
					
					
					
-					
					
. If an amendment provi	des for an excha	inge, reclassifica	tion, or cancellat	ion of issued sha	res,
provisions for implem (if not applicable, t	enting the amen	dment if not con	tained in the ame	endment itself:	
	maretile 1071)				
N/A			<u> </u>		
					·
	<u> </u>				
					
					·

The date of each amendment(s) a	doption: 03/18/2013
Effective date <u>if applicable:</u>	3/18/2013
<u></u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were ad- by the shareholders was/were st	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 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 add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated	1ARCH 18, 2013
Signature ((Samo)
<u> </u>	firector, 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
appoin	ted fiduciary by that fiduciary)
	Feliciano Robayna
	(Typed or printed name of person signing)
	President
	(Title of person signing)