P12000057333

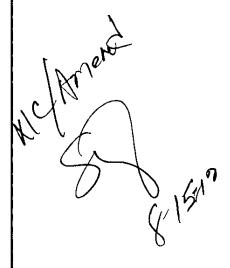
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	☐ MAIL
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Special Instructions to	Filing Officer:	!
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: LLM DELIV	ERY SERVICE	SINC	
	BER: P1200005733			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	MARCOS M VAL	DES		
		Name of Contact Person	1	
	LLM DELIVERY	SERVICES INC		
		Firm/ Company		
	13134 SW 190 LI	N		
		Address		
	MIAMI FLORIDA	33177		
		City/ State and Zip Cod	e	
lisl	etmarcos@yahoo	.com		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
MARCOS M	VALDES	at (786	972-5612	
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 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)	
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Division Clifton	Address Iment Section on of Corporations Building Executive Center Circle	
·		Tallahassee, FL 32301		

Articles of Amendment Articles of Incorporation



LLM DELIVERY SERVICES INC

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

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nt(s) to

P12000057333			
(Documer	nt Number of Corporation	(if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corpora	tion adopts the following amendment
A. If amending name, enter the new na	me of the corporation:		
ML SALES AND CONSU	ILTING INC		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional c	ncorporated" or the abbreviation
B. Enter new principal office address,	if annlicable:	13134 SW 1	190 LN
(Principal office address MUST BE A S		MIAMI FL 3	3177
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		13134 SW 1	190 LN
		MIAMI FL 3	3177
D. If amending the registered agent an new registered agent and/or the new			he name of the
Name of New Registered Agent	MARCOS M V		
	13134 SW 190	LN	
	(Florida s	treet address)	
New Registered Office Address:	MIAMI	, F	llorida 33177 (Zip Code)
<u>inen nogalerea oppernam ass</u> .	(Cit	v)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Ager	ıt:	
I hereby accept the appointment as regist	ered/agent. A am familiai Hilak X	with and accept the obli	igations of the position.
	gnature of New Registered	Agent, if changing	
7			

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			
Add			
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	
an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument if not contained in the amendment user.

The date of each amendment(s) ac	loption: Mediately SG17
Effective date if applicable:	, , , , , , , , , , , , , , , , , , , ,
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add 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)
	(voting group)
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
Dated	1/017
Signature	
(By 8 di	rector president or other officer – if directors or officers have not been 1, by an incorporator – if in the hands of a receiver, trustee, or other court
appoint	ed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(1 yped or printed name of person signing)
	Parislent
	(Title of person signing)