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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: CROSSWAY INTERNATIONAL CORPORATION P12000058641 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CAROLINE JARAMILLO Name of Contact Person MIAMI DADE ACCOUNTING Firm/ Company 11062 NW 89 TER, STË 1703 Address DORAL, FL 33178 City/ State and Zip Code CAROLINEJ@MIAMIDADEACCOUNTING.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JULIANA CONGOTE Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation

FILED

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of CROSSWAY INTERNATIONAL CORPORATION **建成**超程的 2.29 超過 (Name of Corporation as currently filed with the Florida Dept. of State P12000058641 (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 (Cuy) (Zip Code) 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

(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 <u>X</u> Add <u>SV</u> Sally Smith <u>Addres</u>s Type of Action Title Name (Check One) 1779 IBIS LANE **FELIPE CONGOTE** 1) ____ Change WESTON, FL 33327 _ Add Remove 2) ____ Change ___ Add __ Remove 3) ____ Change ___ Add _ Remove Change Add _ Remove 5) ____ Change __ Add _ Remove 6) ____ Change ____ Add

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:

Remove

E. If amending or adding additional Artic	 <u>les, enter change(s) here</u> :	
(Attach additional sheets, if necessary). (Be specific)		
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If an amendment provides for an excha	nge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	intent if not contained in the amendment itsen.	
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The date of each amendment(s) adoption:late this document was signed.	if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does a document's effective date on the Department of	hot meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s) (CI	[] HECK ONE) II
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amendment(s) approval.
☐ The amendment(s) was/were approved by the must be separately provided for each voting	 ne sharcholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the une	 indment(s) was/were sufficient for approval
by	ing group)
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder
■ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder
Dated AUGUST 22, 2017 Signature	
(By a director, pre- selected, by an inc	orporator – if in the hands of a receiver, trustee, or other court by that fiduciary)
JULIANA	CONGOTE
PRESIDE	(Typed or printed name of person signing)
	(Title of person signing)
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