## P1200068749

(Re	equestor's Name)	
(Ad	ldress)	<del>.</del>
(Ad	ldress)	
(Ci	ty/State/Zip/Phon	e #)
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	A.M.G. W	ORLDWID	E EXP	RESS, CORP
DOCUMENT NUMBER:		P12000068		
The enclosed Articles of Amend	<i>ment</i> and fee are su	bmitted for filing.		
Please return all correspondence	concerning this ma	tter to the following	ng:	
	ORE	STES E. A	LONS	0
<del></del>		Name of Cont	act Person	
	A.M.G. W	'ORLWIDE	EXP	RESS, CORP
-		Firm/ Con	npany	<u>,                                      </u>
7430 WEST 12 AVENUE			IUE	
		Addre	ess	
	HIALEAH FL 33014			14
<del>- " " "</del>		City/ State and	l Zip Code	
E-ma	il address: (to be us	sed for future annu	ual report r	notification)
	`		1	,
For further information concerni	ng this matter, pleas	se call:		
ORESTE E. A	ONSO		786	503 - 3010
Name of Contact		at (	Area Cod	e & Daytime Telephone Number
Enclosed is a check for the follow	wing amount made	payable to the Flo	rida Depar	tment of State:
	3.75 Filing Fee & rtificate of Status	□\$43.75 Filing Certified Cop (Additional control enclosed)	ру	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address			Street A	
Amendment Se Division of Co		Amendment Section		
P.O. Box 6327	•	Division of Corporations Clifton Building		
Tallahassee, F			ecutive Center Circle	

Tallahassee, FL 32301

## **Articles of Amendment** Articles of Incorporation

## A.M.G WORLDWIDE EXPRESS, CORP

(Name of Corporation as currently filed with the Florida Dept. of State) P12000068749

(Document	Number of Corporation (if I	known)			
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this F	lorida Profit Corporatio	n adopts the following	amend	ment
A. If amending name, enter the new name	me of the corporation:				
	N/A			The n	1 <i>0</i> W
name must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associate	tion "Corp," "Inc," or "C	o". A professional corp	orporated" or the abl	breviati	ion
B. Enter new principal office address, i	f anniicable:	ORESTE E.	ALONSO > "	=	
(Principal office address MUST BE A ST		· 2)	5 15		
				=	Ċ)
C. Enter new mailing address, if application (Mailing address MAY BE A POST O	7430 WEST 12	2TH AVENUE	AH 10: 35	٠	
		HIALEAH FL	_ 33014		
D. If amending the registered agent and new registered agent and/or the new		ss in Florida, enter the	name of the		
Name of New Registered Agent	ORESTE E. A	ALONSO			
Hume of New Negaterea Agent	7430 WEST 12	AVENUE	<del></del>		
New Registered Office Address:	(Florida stree				
	HIALEAH		33014		
	(City)		(Zip Code)		
New Registered Agent's Signature, if ch	anging Registered Agent:				
I hereby accept the appointment as registe		th and accept the obliga	tions of the position.		
	4				
Sig	<del>nd</del> lure of New Registered Ag	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.

X Change	<u>79</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	Р	ORESTE E. ALONSO	7430 WEST 12 AVENUE
X_Add			HIALEAH FL 33014
Remove			
2) X Change	VP	ARMANDO MORALES	6595 WEST 2ND CT
Add			HIALEAH FL 33012
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
<del></del>	
	<del></del>
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:  N/A

The date of each	amendment(s) ado	Option: AUGUST 10, 2012
Effective date if a		
		(no more than 90 days after amendment file date)
Adoption of Ame	ndment(s)	(CHECK ONE)
	t(s) was/were adop ders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.
		oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The num	ber of votes cast fo	or the amendment(s) was/were sufficient for approval
by	<del>.</del>	(voting group)
The amendmen action was not i	t(s) was/were adop	ted by the board of directors without shareholder action and shareholder
☐ The amendment action was not a		ted by the incorporators without shareholder action and shareholder
	DatedAU	GUST 10, 2012
	Signature(By a dire	ector, president or other officer – if directors or officers have not been
	selected,	by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
	_	ARMANDO MORALES
	_	(Typed or printed name of person signing)
	_	PRESIDENT
		(Title of person signing)