P130000 51068

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ALL COURIER &	SERVICES, INC	
DOCUMENT NUM	P13000051068		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corro	spondence concerning this ma	tter to the following:	
	LILIA A GONZALEZ		
		Name of Contact Person	
		Firm/ Company	
	5251 SW IST ST		
		Address	
	MIAMI, FL 33534		
		City/ State and Zip Code	?
	liliarealto21@yahoo.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
ILIA A GONZALEZ		at (<u>305</u>	710-4941
Name	of Contact Person	Area Co	le & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

A	L	L	CO	UR	IER	&	SER'	V	ICES	INC
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ALL COURIER & SERVICES INC	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P13000051068	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>F</i> its Articles of Incorporation:	Clorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable:	201
(Principal office address MUST BE A STREET ADDRESS)	
	70 P
	100 mg
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Mulling dudress MAT BE A TOST OFFICE BOA)	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida
(City) (Zip Code)
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 Re	gistered Agent, if changing
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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)

Example:

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>PT</u>	John Doc	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	VP	Odalys Gonzalez	2101 SW 67 Ludlam Rd Apt 1-244
xAdd			West Miami Fl 33155
Remove			
2) Change			_
Add			
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
(Attach daditional sneets, if necessa	rry. (ne specific)			
<u>-</u>				
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)			
•	· · · · · · · · · · · · · · · · · · ·			

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective data if applicable:	
(no mo	re than 90 days after amendment file date)
Note: If the date inserted in this block does not meet to document's effective date on the Department of State's r	the applicable statutory filing requirements, this date will not be listed as the records.
Adoption of Amendment(s) (CHECK O	<u>NE</u>)
The amendment(s) was/were adopted by the incorpor action was not required.	ators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the sharehol by the shareholders was/were sufficient for approval	
☐ The amendment(s) was/were approved by the sharehor must be separately provided for each voting group each voting grou	
"The number of votes east for the amendment(s) was/were sufficient for approval
by	n)
. (voting grou	
Dated	6 - 2020
(By a director, president or e	other officer - if directors or officers have not been - if in the hands of a receiver, trustee, or other court fiduciary)
LILIA A GONZAL	EZ
(Typed o	or printed name of person signing)
President	
(Title of	person signing)