(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Final Destin	nation Freight So	ervices Inc.			
DOCUMENT NUMBER: P1300005283	4				
The enclosed Articles of Amendment and fee are su					
Please return all correspondence concerning this man	tter to the following:				
Igor Tokarev					
<u>.gee</u>	Name of Contact Person				
700 Oaklawn st	Firm/ Company 700 Oaklawn st				
Address					
Fort Walton Beac					
	City/ State and Zip Code	2			
finaldestinationllc@g					
E-mail address: (to be us	ed for future annual report	notification)			
For further information concerning this matter, pleas	e call:				
Igor Tokarev	at (850	, 226-2246			
Name of Contact Person		de & Daytime Telephone Number			
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment of State:			
\$35 Filing Fee \$\times \text{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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301			

Articles of Amendment to Articles of Incorporation of

Final Destination Freight	Services Inc.		_
· · · · · · · · · · · · · · · · · · ·	currently filed with the Flo	orida Dept. of State)	
P13000052834	t Number of Corporation (if	known	-
·	•		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	Clorida Profit Corporation adopts the following	ig amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
N/A			_The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associate	ation "Corp," "Inc," or "C		bbreviation contain the
B. Enter new principal office address, if applicable:		347 Hollywood Blvd NW	_
(Principal office address MUST BE A ST	TREET ADDRESS)	Fort Walton Beach	
		FI 32548	- -
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P.O. Box 1555	
		Fort Walton Beach	_
		FI 32549	_
D. If amending the registered agent an new registered agent and/or the new		ess in Florida, enter the name of the	ದ :≦್ಟ್ರ
Name of New Registered Agent	Tokarev Igor		8
	347 Hollywood E	Blvd NW	- 12 - 12
	(Florida stree	,	3-4
New Registered Office Address:	Fort Walton Beach , Florida 32548		PHIL: P.
	(City)	(Zip Code)	1 A
		ith and accept the obligations of the position.	

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 Do	<u>e</u>	
X Remove	Y	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP	_	Minaylova Valentina	700 Oaklawn st
Add				Fort Walton Beach
Remove				FI 32547
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

samending or adding additional Artic attach additional sheets, if necessary).	(Be specific)			
				
		····		
	<u> </u>			
			<u> </u>	
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				<u>-</u>
			 	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification ndment if not conta	on, or cancellation ined in the amend	of issued shares, ment itself:	
				
			 	

date this document was signed.	s) adoption:	, if other than the
Effective date if applicable:	12/6/2013	
<u>парричине</u> .	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated_12/06	6/2013	
Dateu		
Signature	For Vohere	
(By	a director, president or other officer - if directors or officers have not been	
	ected, by an incorporator - if in the hands of a receiver, trustee, or other court	
арр	pointed fiduciary by that fiduciary)	
	lgor Tokarev	
	(Typed or printed name of person signing)	_
	President	
	(Title of person signing)	