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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

> P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPO	ORATION: ESTATES LOGIS	TICS CORP		
DOCUMENT NUN	<b>4BER:</b> P13000060175			
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.		
Please return all corr	respondence concerning this ma	atter to the following:		
	MANI SIERRA			
		Name of Contact Perso	n	
	ESTATES LOGISTICS COI	₹P		
		Firm/ Company		
	11665 COLLIER BLVD			•
		Address		
	NAPLES FL 34101			
		City/ State and Zip Cod	e	
INIT	'ERSTATECARRIERSERVIC	E@VAUOO COM		
		sed for future annual report	natification)	
	E-man address. (to be di	sed for future annual report	nonneadon)	<u> </u>
For further informati	on concerning this matter, pleas	se call:		SERVE FART
LOURDES GARCL	A	786 at (	3466290	22
Name	Name of Contact Person Area Code & Daytime Telephone Number		— 22 AS	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	~3 O
\$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)	Allews 2007
Ar Di	ailing Address nendment Section vision of Corporations D. Box 6327	Amend Division	Address Iment Section on of Corporations Building	

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

ESTATES LOGISTICS CORP

(Name of Corp	oration as currently filed with the Florida Dept. of State)	
P13000060175		
(E	Occument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this Florida Profit Corporation adopts the follow	ring amendment(s)
A. If amending name, enter the new name of t	the corporation:	
		The new
	e word "corporation," "company," or "incorporated" or the Corp," "Inc," or "Co". A professional corporation name mustree the abbreviation "P.A."	
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET	cable:	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	F ROY)	
(maning man tos man to be		9:Vielo 17
D. If amending the registered agent and/or registered agent and/or the new regist	gistered office address in Florida, enter the name of the ered office address:	EN 21
Name of New Registered Agent		
		2: 2:
	(Florida street address)	
New Registered Office Address:	, Florida	
	(City) (Zi	p Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ago	z Registered Agent: ent. I am familiar with and accept the obligations of the position	<i>1</i> .
	Signature of New Registered Agent if changing	<del></del>

## 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  $\dot{V}$ . 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	PŢ	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	P	MANI SIERRA	11665 COLLIER STE 113
Add X Remove			NAPLES FL 34116
2) Change	P	YENISBEL CRESPO	11665 COLLIER BLVD STE 113
X Add			NAPLES FL 34116
Remove			
3) Change			
Add			·
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<del></del>
6) Change			
Add			
Remove			•

<b>f amending or adding additional Arti</b> Attach <i>additional sheets, if necessary).</i>	(Be specific)
•	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
· ·	
Effective date <u>if applicable</u> :  (no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date value of document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
(By a director, 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 appointed fiduciary by that fiduciary)	
MANI SIERRA	
(Typed or printed name of person signing)	<del> </del>
PRESIDENT	
(Title of person signing)	<del></del>

. . . .