P13000063206

(Requestor's Name)
(Address)
(Address)
(Address)
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·
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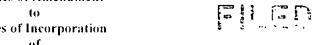


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: OPTION ONE LO	GISTICS, INC		
DOCUMENT NUMB	ER:P13000063206			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
		JESSICA S ORELLANA		
-		Name of Contact Persor		
-	-	Firm/ Company	·	
	1609-7	74TH STREET # 1		
-		Address		
_	NORT	H BERGEN, NJ 07047		
		City/ State and Zip Code	•	
	JORELLA	NA2001@AOL.COM		
-	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call;		
JESSICA S	JESSICA S ORELLANA 407 244-0514)	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	☐S43.75 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

Articles of Amendment Articles of Incorporation



OPTION ONE LOGISTICS, INC.

2021 DEC 10 AM 9: 31

(<u>Name of Corporation as currently</u> P13000063206	v filed with the Florida Dep	iteof(State) YOU STATE
P13000063206		TALL ARABIT COLUMN
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006 . Florida Statutes, this μ its Articles of Incorporation:	Florida Profit Corporation a	dopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:		
N/A		The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", A "chartered," "professional association," or the abbreviation "P.A."		or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		_
		
C. Enter new mailing address, if applicable:	N/A	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
D. If amending the registered agent and/or registered office addr	ess in Florida, enter the na	me of the
new registered agent and/or the new registered office address:		
Name of New Registered Agent N/A		
(Florida stre	vet address)	
New Registered Office Address:		. Florida
	(City)	(Zip Code)
New Registered Office Address:	(City)	- · · · · · · · · · · · · · · · · · · ·
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 obligation	is of the position.
		y
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)

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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	Р	JOSE A PINEDA	6225 BENT PINE DR # 413-A
Add			ORLANDO, FLORIDA 32822
X Remove 2) Change	VP	CARLOS PINEDA	6225 BENT PINE DR # 413-A
Add			ORLANDO, FLORIDA 32822
X Remove	Р	JESSICA S ORELLANA	1609-74TH STREET #1
_XAdd			NORTH BERGEN, NJ 07047
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if neces	sary). (Be specif	ic)			
!/A					
					
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f an amendment provides for a	ın exchange, recla	ssification, or ca	ncellation of issu	ied shares,	
provisions for implementing th	he amendment if n	ot contained in (the amendment i	itself:	
(if not applicable, indicate i	V/-1)				
/A					
<u> </u>					
					
					
				 	

12/08/2021
The date of each amendment(s) adoption:
date this document was signed.
12/08/2021
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
■ 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 east for the amendment(s) was/were sufficient for approval
by
(voting group)
Signature (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)
JESSICA S ORELLANA
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)