300086153

(Req	uestor's Name)	
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(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Doc	ument Number)	
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SUCRETARY OF STATE
DIVISION OF COSTGRATIONS

Ansend (C) Ju 5/15/15

COVER LETTER

Division of Corporat	ions		
NAME OF CORPORAT	110N: LEGIUM 1: P130000	1 Express 186153	ŊΙ
The enclosed Articles of A	Amendment and fee are su	ibmitted for filing.	
Please return all correspon	ndence concerning this ma	atter to the following:	
	Marison - Carner S QCP15 No Jicimi F(Name of Contact Person Service Firm/ Company Address 33109	
		City/ State and Zip Code	•
	E-mail address: (to be us	sed for future annual report	notification)
For further information co	ncerning this matter, pleas	se call:	0.00
<u>Marisul</u>	Tures	at (305	652-4490
Name of C	ontact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for the	e following amount made	payable to the Florida Depa	rtment of State:
11 \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

Legion Express In	
(Name of Corporation as currently fi	ed with the Florida Dept. of State)
(Document Number of Co	recording (if Impure)
(Document Number of Co	rporation (it known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	rida 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," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SECRETARY I
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	
	, Florida
New Registered Office Address: (Ci	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with Signature of New Registered Agent.	a and accept the obligations of the position. istered Agent, if changing
Signature of New Regi	Siereu Agent, ij chunging

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> Jo	hn Doe					
X Remove		ike Jones					
_X Add		lly Smith					
Type of Action (Check One)	<u>Title</u>	<u>Name</u>			Address		
1) Change	VP_	Alex	cey Ma	zaev			
Add				-			
2) Change	VP_	RUS1	ana Pol	<u> tavet</u> S)		
✓ Add	Rus	lam	Polta	vets!	1915 RODIN	100 St #	11
Remove	1/4	TOTAL	101101	1	FOUNDING	F1, 3300) (
3) Change			· <u>.</u>				
Add							
Remove				-		- 	
4) Change	 -						
Add				_			
Remove				_			
5) Change			··	 -			
Add				_			
Remove				-	****		
6) Change				 _			
Add				_		 	
Remove							

ttach additional shee	ng additional Articles, ets, if necessary). (B	le specific)			
					
			·		
	_ 				
					· · · · · · · · · · · · · · · · · · ·
					
		·····			
					
an amendment proprovisions for imple	ovides for an exchang ementing the amendm le, indicate N/A)	ze, reclassification, nent if not contains	or cancellation of ad in the amendme	issued shares, nt itself:	
		 ,			
 					
					

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date 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 re-	he applicable statutory filing requirements, this date will not be listed as the ecords.
Adoption of Amendment(s) (CHECK O	<u>NE</u>)
The amendment(s) was/were adopted by the sharehold by the shareholders was/were sufficient for approval.	ders. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareho must be separately provided for each voting group en	
"The number of votes east for the amendment(s)	was/were sufficient for approval
by	<u> </u>
(voting group	מין
☐ The amendment(s) was/were adopted by the board of action was not required.	directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorpora action was not required.	ators without shareholder action and shareholder
Dated 5-7-15	
Signature	1
(By a dicector, president or o selected, by an incorporator	ther offiger – if directors or officers have not been – if in the hands of a receiver, trustee, or other court
appointed fiduciary by that f	
	10 eksandr PoHaver
(Typed or	printed name of person signing)
1	President
	(Title of person signing)