Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : CLAUDIA LIMA TAX & ACCOUNTING LLC

Account Number : I20230000193 Phone : (407)552-7903 Fax Number : (407)449-2348

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

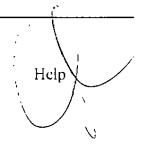
Email Address: NFO@CLAUDIALIMATAX.COM

COR AMND/RESTATE/CORRECT OR O/D RESIGN LSA LOGISTICS INC

Certificate of Status	0
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COVER LETTER

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		COVERLETTER		
TO: Amendment Se Division of Co				
NAME OF CORP	ORATION: LSA LOGISTICS	INC		
	MBER: P13000092002			•
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all cor	respondence concerning this ma	atter to the following:		
	CLAUDIA LIMA			
		Name of Contact Perso	n	
	CLAUDIA LIMA TAX & A	CCOUNTING LLC		
		Firm/ Company		
	9100 CONROY WINDERM	• •	E 241	
		Address		
	WINDERMERE, FL 34786			
		City/ State and Zip Cod	e	
	INFO@CLAUDIALIMATA	X.COM		
	E-mail address: (to be us	sed for future annual report	notification)	(7)
				111
For further informat	ion concerning this matter, pleas	se call:		1175
CLAUDIA LIMA		at (⁴⁰⁷) 552-7903 de & Daytime Telephone Nu	
Name	c of Contact Person	Area Co	de & Daytime Telephone Nu	mber
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52,50 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 2024 MAY 31 AM 9: 22

		Amendment			
	-	o ncorporation			
	O	of			
LSA LOGISTICS INC					
	of Corporation as curren	tly filed with the Florida De	pt. of State)	-	
P13000092002		<u></u>			
	(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation	adopts the following	g ameno	im ent (s) to
A. If amending name, enter the new n	ame of the corporation:				
				The i	new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C" chartered," "professional association,"	Corp," "Inc," or "Co". or the abbreviation "P.A.	A professional corporation	l" or the abbreviation name must contain	n "Corp the w	v.," ord
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable:		,		- -
(trincipal office address <u>Frost BE A S</u>	TREET ADDRESS))24	
				I»	
			•	<	* 0
			<u> </u>	<u>-</u> 5	- 42-42-0
				_ _	-
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>			3: AS: E.	- X	- = - - m - 5
			XX.	_ _	
				Y 31 AM 9:	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new	OFFICE BOX) id/or registered office add		The same of the	Y 31 AM 9: 2	
(Mailing address MAY BE A POST D. If amending the registered agent an	OFFICE BOX) id/or registered office add	<u>s:</u>	ame of the	Y 31 AM 9: 2	
(Mailing address MAY BE A POST D. If amending the registered agent an new registered agent and/or the new	offFICE BOX) Id/or registered office add w registered office addres CLAUDIA LIMA TAX &	<u>s:</u>		Y 31 AM 9: 2	
(Mailing address MAY BE A POST D. If amending the registered agent an new registered agent and/or the new	office BOX) ad/or registered office add registered office addres CLAUDIA LIMA TAX &	s: & ACCOUNTING LLC		Y 31 AM 9: 2	
(Mailing address MAY BE A POST D. If amending the registered agent an new registered agent and/or the new	office BOX) ad/or registered office add registered office addres CLAUDIA LIMA TAX &	S: & ACCOUNTING LLC RMERE RD STE 200 OFFIC		Y 31 AM 9: 2	

New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

____ Add

5/8 231.5.2024 7:49:25

X

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	PT	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VPDS	VESELASKI, STEPHEN, JR	265 S FEDERAL HWY
Add		- · · ·	SUITE 257
X Remove			DEERFIELD BEACH; FL 3344
2) Change			DEERFIELD BEACH, FL 3344
Add			
Remove Change			9.
Add			
Remove			
4) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
5) Change			-1
Add			
Remove			
5) Change			

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date this	te of each amendment(s) a s document was signed. Te date if applicable:	doption:				, if oth	er than the
Effectiv	е име <u>и аррисаоле;</u>	(no more tha	n 90 days after amendment fi	le date)			-
Note: I	f the date inserted in this l nt's effective date on the D	plock does not meet the ap	plicable statutory filing requi s.	irements,	this date will n	ot be li	sted as the
Adoptic	on of Amendment(s)	(CHECK ONE)					
■ The a	amendment(s) was/were ad n was not required.	opted by the incorporators,	or board of directors without	sharehol	der action and sh	nareholo	ier
	amendment(s) was/were ad- ne shareholders was/were si		The number of votes cast for	the amer	idment(s)		
			through voting groups. The f to vote separately on the amo			2024	
			were sufficient for approval			2024 MAY 3 I	
		(voting group)	·		AS' E	<u> </u>	¹ 77
	MAY 29T)	1 2024			<u></u>	AM 9:23	Ö
	Sianatura				••	~	
	(By a d selecte		officer – if directors or officers to the hands of a receiver, trust ary)				
		ELISANGELA J VESELA	NSKI				
		(Typed or print	ed name of person signing)				-
		PDS					
		(Title of person	signing)			· -	_