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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: SAIMDEI COURI	ER CORPOR	ATION		
DOCUMENT NUMB	P14000002093				
The enclosed Articles	of Amendment and fee are su	bmitted for fili	ng.		
Please return all corres	pondence concerning this mat	ter to the follo	wing:		
	LUIS VALENCIA				
,	, The state of the	Name of Co	ntact Person	l	
	SEIMDEI COURIER CORP	ORATION			
,		Firm/ C	Company		
	2073 BRIGHTLEAF WAY				
,		Ado	iress		
	MARIETTA GA 30060				
		City/ State a	ınd Zip Code	2	
le	iis.valencia.83@outlock.com				
	E-mail address: (to be us	ed for future a	nnual report	notification)	
For further information	n concerning this matter, pleas	se call:			
LUIS VALENCIA Name of Contact Person		at (404		
		Area Code & Daytime Telephone Num			
Enclosed is a check fo	r the following amount made	payable to the l	Florida Depa	artment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fil Certified ((Additiona enclosed)	Copy I copy is	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section				Address	
		Amendment Section			
	sion of Corporations Box 6327	Division of Corporations Clifton Building			
P.O. Box 6327 Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

Λf

SAIMDEL COURIER CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State) P14000002093 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: SEIMDEI COURIER CORPORATION name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: , Florida (City) (Zip Code) 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

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	<u>PT</u>	John Doe	
X Remove	<u>Y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove			<u> </u>
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
			
Remove			
6) Change			
Add			
Remove			

(Attach add	ng or adding additional ditional sheets, if necessai	y) (Be specific)	 .			
/A						
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If an ame	ndment provides for an	exchange, reclassi	lication, or cancell	ation of issued sh	ares,	
provision (if no	ns for implementing the out of the output of	<u>amendment if not</u> ()	contained in the a	mendment itself:		
'A	77	,				
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	JUNE-27-2017	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:	JUNE-27-2017	
Effective date <u>if applicable</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendme ufficient for approval.	n(s)
	proved by the shareholders through voting groups. The following state reach voting group entitled to vote separately on the amendment(s):	ment
"The number of votes case	for the amendment(s) was/were sufficient for approval	
by N/A	."	
,	(voting group)	
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareho	lder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
JUNE-27 Dated Signature	us A Volence	
(By a selection	director, president or other officer — if directors or officers have not be ed, by an incorporator — if in the hands of a receiver, trustee, or other cotted fiduciary by that fiduciary)	
	LUIS VALENCIA	
	(Typed or printed name of person signing)	<u> </u>
	PRESIDENT	
	(Title of person signing)	