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(Re	equestor's Name)	
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SECRETARY OF STATE
AND ANALYSEE, FLORIDA



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MODERN DOCUMENT NUMBER: P140000075	LOGISTIC SERVICES, INC	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
NELLO P. KHAI	N	
	Name of Contact Person	
MODERN LOGI	ISTIC SERVICES, INC	
	Firm/ Company	
1800 NW 135 T	H AVE, SUITE 108	
	Address	
MIAMI, FL 3318	32	
	City/ State and Zip Code	
PNK@MODERNLO	OGISTICSERVICES.COM	
	used for future annual report notification)	
For further information concerning this matter, plo	ease call:	
PETER KHAN	at (305) 597-0206	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount mad	le payable to the Florida Department of State:	
\$35 Filing Fee & Certificate of Status		
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MODERN LOGISTIC SERVICES, INC

(Name of Corporation as currently filed with the Florid	la Dept. of State)		
(Document Number of Corporation (if kno	wn)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	ida Profit Corporation ado	pts the following	amendment(s) t
A. If amending name, enter the new name of the corporation:			
			The new
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 corporati		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
_			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
		7A S 26	
D. If amending the registered agent and/or registered office address	n Florida, enter the name	of the	magang and
new registered agent and/or the new registered office address:		S S S	~ g
Name of New Registered Agent		-6 D	
(Florida street a	ddress)	2: 11 STATE LORID;	J
New Registered Office Address: (City)	, Florida	(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 o	of the position.	

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 <math>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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	s	PETER NELLO KHAN	1800 NW 135 TH AVE
Add			SUITE 108,
Remove			MIAMI, FL 33182
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		 	
Add			
Remove			

f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	Attach additional sheets, if necessary).	(Be specific)	
provisions for implementing the amendment if not contained in the amendment itself:			
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provisions for implementing the amendment if not contained in the amendment itself:	f an amendment provides <u>for an excl</u>	ange, reclassification, or cancellation of i	issued shares.
(if not applicable, indicate N/A)	provisions for implementing the ame	dment if not contained in the amendmer	nt itself:
	(if not applicable, indicate N/A)		
		·	
			

The date of each amendment(s) adoption: May 22, 2014	, if other than the
date this document was signed.	
Effective date if applicable: May 22, 2014	
(no more than 90 days after amendment file date)	_
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_05/22/2014	
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)	_
PETER KHAN	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	