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COVER LETTER

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION: MUSA LARACH I	ENVIOS, INC.		
DOCUMENT NUMBER: P14000028955		_	
The enclosed Articles of Amendment and fee are sub	bmitted for filir	ng.	
Please return all correspondence concerning this mat		_	
		Ų	
HEYZEL MERCADO	Name of Co	0	
MUSA LARACH ENVIOS, I		miactr	drson
	Firm/ C	Compan	<u> </u>
6908 NW 46TH STREET		•	
	Ado	iress	
MIAMI, FLORIDA		·	
	City/ State a	ind Zip	Code 
MLENVIOS@ICLOUD.COM			
E-mail address: (to be use	ed for future ar	nnual re	port notification)
For further information concerning this matter, please	e call:		
HEYZEL MERCADO	at (	786	4420191
Name of Contact Person	···· (	Are	a Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the I	·lorida	 Department of State:
■ \$35 Filing Fee	☐\$43.75 Fil Certified C (Additiona enclosed)	Сору	Certificate of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		A Di Cl 26	reet Address mendment Section vision of Corporations ifton Building 61 Executive Center Circle illahassee, FL 32301

## Articles of Amendment

to

## Articles of Incorporation

οf

MUSA LARACH ENVIOS, INC

		· ·
(Name o	of Corporation as currently	filed with the Florida Dept. of State)
	P14000028955	
	(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Fi	Iorida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new na	ame of the corporation:	
	ation "Corp," "Inc," or "Cotion," or the abbreviation "P.	The new "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the
(Principal office address <u>MUST BE A S</u>		
C. Enter new mailing address, if applia (Mailing address MAYBE A POST)  D. If amending the registered agent an	OFFICE BOX)	ss in Florida, enter the name of the
new registered agent and/or the new		No. 10 Control of the
Name of New Registered Agent	HEYZEL MERCADO	
	6908 NW 46TH STREET	
	(Florida stree	t address)
New Registered Office Address:	MIAMI	, Florida
	(0	Zity) (Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist  Y	ered agent. I am familiar wi #111	th and accept the obligations of the position.
	Signature of New Reg	gistered 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 fisted 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: XChange	<u>PT</u>	John Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jones			
X Add	<u>sv</u>	Sally Sm	<u>vith</u>		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change	P	_	SAMIR M LARACH ROSSA	LES	6908 NW 46TH STREET
Add					MIAMI, FLORIDA 33166
X Remove					
2) Change	VP		SAMIR M. LARACH ROSSA	LES	6908 NW 46TH STREET
X Add					MIAMI, FLORIDA 33166
Remove	D. 60		THE PERSON AND THE PE		
3 ) Change	Р/Г		HEYZEL MERCADO	<u> </u>	6908 NW 46TH STREET
X Add					MIAMI, FLORIDA 33166
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
6) Change		<del>-</del>		<u> </u>	<u> </u>
Add					
Remove					

E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
_ <del></del> .	
If an amendment provides for an exchange, reclassification, or can provisions for implementing the amendment if not contained in the	cellation of issued shares,
(if not applicable, indicate N/A)	and the state of t
·	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days)	nfter amendment file date)
Note: If the date inserted in this block does not meet the applicable st document's effective date on the Department of State's records.	atutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	of votes cast for the amendment(s).
☐ The amendment(s) was/were approved by the shareholders through vomust be separately provided for each voting group entitled to vote sequences.	
"The number of votes cast for the amendment(s) was/were suffic	ient for approval
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors withou action was not required.	t shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without sha action was not required.	reholder action and shareholder
Dated 7/22/2017	
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)	
SAMIR M. LARACH ROSSALES	
(Typed or printed name o	f person signing)
VICE-PRESIDENT	
(Title of perso	on signing)