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From:

: RC TAX SERVICE LLC Account Name

Account Number : I20140000083

Phone

: (407)932-0040

Fax Number

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COR AMND/RESTATE/CORRECT OR O/D RESIGN LIS TRUCKING CONNECTIONS, INC

OCT 1 7 2017

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## COYER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: LIS TRUCKING CONNECTIONS, INC DOCUMENT NUMBER: P14000052582 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: HECTOR HENAO Name of Contact Person LIS TRUCKING CONNECTIONS, INC Firm/ Company 13750 W. COLONIAL DR. 350-205 Address WINTER GARDEN, FL 34787 City/ State and Zip Code B-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: HECTOR HENAO Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fcc □\$43.75 Filing Fee & **□\$43.75** Filing Fee & S35 Filing Fee Certified Copy Certificate of Status Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

## Articles of Amendment to Articles of Incorporation of

## LIS TRUCKING CONNECTIONS, INC

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amits Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevalor, "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional ecorporation, name must contain the word "corporation," or the abbrevalor "P.A."  B. Eater 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)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or registered office address.  Name of New Registered Agent  HECTOR HENAO  13750 W. COLONIAL DR. 350-205 (Florida street address)  WINTER GARDEN  New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amits Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevatory, "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A."  B. Euter 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)  D. If amending the registered agent and/or registered office address:  Name of New Registered Agent  HECTOR HENAO  13750 W. COLONIAL DR. 350-205  (Florida street address)  WINTER GARDEN  Florida  New Registered Office Address:  WINTER GARDEN  Florida  14787  (City)  New Registered Agent's Signature, if changing Registered Agent:	
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13750 W. COLONIAL DR. 350-205  (Florida street address)  New Registered Office Address:  WINTER GARDEN  (City)  (City)  New Registered Agent's Signature, if changing Registered Agent:	· · ·
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New Registered Office Address:  (City)  (City)  New Registered Agent's Signature, if changing Registered Agent:	
(City) (Zip Cods)  New Registered Agent's Signature, if changing Registered Agent:	
St Land of	
Signature of New Registered Agent, if changing	•

Address of each Officer (Attach additional sheets, Please note the officer/di. P = President; V= Vice Executive Officer; CFO held. President, Treasure Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove	and or L if necess rector title Presiden — Chief I ir, Direct I in the fo wes the c	nrector being added: sary) le by the first letter of the office title: t; T= Treasurer; S= Secretary: D= Director; Financial Officer. If an afficer/director holds or would be PTD. illowing manner: Currently John Doe is listed corporation, Sally Smith is named the V and S	officer/director being removed and title, name, and  TR= Trustee; C = Chairman or Clerk; CEO = Chief s more than one title, list the first letter of each office d as the PST and Mike Jones is listed as the V. There is These should be noted as John Doe, PT as a Change.
Example: XChange	<u>PT</u>	John Doe	:
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
l) Change	P ·	LISDARY HENAO	13750 W. COLONIAL DR.
Add			350-205
X Remove	•		WINTER GARDEN, FL 34787
2) X Change	P	HECTOR HENAO	13750 W. COLONIAL DR.
Add		,	350-205
Remove			WINTER GARDEN, FL 34787
3)Change	<u> </u>	·	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			· · ·

Add

Remove

mending or adding additional Articles, enter change(s) here:  ach additional sheets, if necessary). (Be specific)	•
an amendment provides for an exchange, reclassification, or cancellation of issued share rovisions for implementing the amendment if not contained in the amendment itself:	25,
(if not applicable, indicate N/A)	
•	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date [f applicable:	
(no more than 90 days after	r amendment file date)
Note: If the date inserted in this block does not meet the applicable statute document's effective date on the Department of State's records.	ory 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 of by the shareholders was/were sufficient for approval.	f votes east for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separate	groups. The following statement attended to the amendment(s):
"The number of votes east for the amendment(s) was/were sufficient	t for approval
by(voting group)	,75
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shaption was not required.	areholder action and shareholder
The amendment(s) was/were adopted by the incorporators without sharehoutin was not required.	older action and shareholder
Dated 10/13/2017 Signature 10/13/2017	a 57
(By a director, president or other officer - if dire	
selected, by an incorporator - if in the hands of	a receiver, trustee, or other court
appointed fiduciary by that fiduciary)	
HECTOR HER	OAN
(Typed or printed name of pe	rson signing)
VICE-PRESIDENT	T
(Title of person s	ioning)