## P14000054871

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
. (Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special instructions to	Filing Officer:	
<b>)</b>		

Office Use Only



100275599461

08/04/15--01021--006 \*\*70.00

15 AUG - 4 PM 1: 00

SECHETARY OF STATE

AUG G 2015 CLEWIS

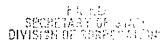
## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	TON: Bach Logistics, Inc	). 	
DOCUMENT NUMBER		7	
The enclosed Articles of A	mendment and fee are su	bmitted for filing.	
Please return all correspon	dence concerning this ma	tter to the following.	
Gar	ry Bach Jr.		
	Name of Contact Person		
Bac	h Logistics, Inc.		
<del> </del>		Firm/ Company	
294	CR 312		
<del></del> -		Address	
Bus	shnell, FL 33513		
		City/ State and Zip Cod	2
bachcontr	acting@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information co.	ncerning this matter, pleas	se call:	
Garry Bach Jr.		at (	568-8971
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the	e following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52 50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendn Division P.O. Bo	Address nent Section of Corporations x 6327 see, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently filed with the Florida Dept. of State)  P14000054871  (Document Number of Corporation (if known)  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:  N/A  The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbre "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co", A professional corporation name must conteword "chartered," "professional association," or the abbreviation "P.A."  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)  N/A  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:  N/A  (Florida street address)	
(Document Number of Corporation (if known)  Pursuant to the provisions of section 607-1006, Florida Statutes, this Florida Profit Corporation adopts the following am its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  N/A  The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbre "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must conte word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  (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  N/A	endment(s
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:  N/A  The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbree "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must content word "chartered," "professional association," or the abbreviation "P.A."  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)  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:  N/A  Name of New Registered Agent  N/A	endment(s
A. If amending name, enter the new name of the corporation:  N/A  The name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbre "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must conteword "chartered," "professional association," or the abbreviation "P.A."  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)  N/A  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:  N/A	nendment(s
name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbre "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must conte 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: (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:  N/A  Name of New Registered Agent  N/A	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbre "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must conte word "chartered." "professional association," or the abbreviation "P.A."  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)  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:  N/A  Name of New Registered Agent  N/A	
name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbre "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must conte word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  (Mailing address MAY BE A POST OFFICE BOX)  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 the new registered office address:  N/A	? <i>пе</i> и•
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)  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:  N/A  Name of New Registered Agent  N/A	viation
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 the new registered office address:  Name of New Registered Agent  N/A	
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 the new registered office address:  Name of New Registered Agent  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  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  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  N/A	
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  N/A	
new registered agent and/or the new registered office address:  N/A  Name of New Registered Agent	
new registered agent and/or the new registered office address:  N/A  Name of New Registered Agent	<del></del>
new registered agent and/or the new registered office address:  N/A  Name of New Registered Agent	
new registered agent and/or the new registered office address:  N/A  Name of New Registered Agent	
Name of New Registered Agent N/A	
Name of New Registered Agent	
(Florida street address)	
(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 <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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	S	Sanders, Miranda L	3294 CR 312
Add			Bushnell, FL 33513
X Remove			
2) Change	<del></del>		
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change		<del></del>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Ar (Attach additional sheets, if necessary).	rticles, enter change(s) here:  (Re specific)	
N/A	, , , , , , , , , , , , , , , , , , , ,	
······		
F. If an amendment provides for an ex-	change, reclassification, or cancellation of issued shares,	
provisions for implementing the am	nendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
N/Λ		
<del></del>		

The date of each amendment(s) adoption	n:	, if other than the
date this document was signed.		يحدثن أن المنافقة
Effective date <u>if applicable</u> :		SECRETARY OF GREEN
	(no more than 90 days after amendment f	
<b>Note:</b> If the date inserted in this block document's effective date on the Departm	does not meet the applicable statutory filing requent of State's records.	15 AUG -4 PM 1: 09 airements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for approval.	the amendment(s)
	by the shareholders through voting groups. The swoting group entitled to vote separately on the an	
"The number of votes cast for th	e amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action	on and shareholder
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action an	nd shareholder
Signature	N/Balle.	
selected, by	r, president or other officer – if directors or office an incorporator – if in the hands of a receiver, trus luciary by that fiduciary)	
Garry	Bach Jr.	
	(Typed or printed name of person signing)	
Presi	dent	
	(Title of person signing)	