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COVER LETTER

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TO: Amendment Section Division of Corpora		. 0	
NAME OF CORPORA	TION: $\frac{\int U}{\int U}$	1 Lite 100	gistics inc.
NAME OF CORPORATION: DOCUMENT NUMBER: P 140 000 60 119			<u> </u>
The enclosed Articles of	Amendment and fee are sul	omitted for filing.	
Please return all correspo	ondence concerning this mat	ter to the following:	•
	FIAN	14 ACANO	λA·
		Name of Contact Perso	
		Firm/ Company	
	12500	SW 184	ST.
	M;	SW 184 ani, FL	33177.
_		City/ State and Zip Coo	
	Sunlife	logistics @	OUTLOOK. COM.
	E-mail address: (to be us	sed for future annual repor	t notification)
For further information of	concerning this matter, pleas	se call:	
Frank Name of	ACANDA .	at (786	ode & Daytime Telephone Number
England is a shadt for t	he following amount made	oavable to the Florida Der	partment of State:
Enclosed is a check for t	ne tonowing amount made	payable to the Florida is ep	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. F	ng Address dment Section on of Corporations Box 6327 hassee, FL 32314	Amer Divis Clifto 2661	t Address adment Section ion of Corporations on Building Executive Center Circle hassee, FL 32301

Articles of Amendment

to

Articles	of	Incorp	oration
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	Articles of Incom	rporation	
0.1.1	of	· T ·	
JUN LI		CS InC. filed with the Florida Dept. o	(State)
(Name of Co	P 140000 (a)		1 State)
	(Document Number of		
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	, Florida Statutes, this F	<i>lorida Profit Corporation</i> adop	its the following amendment(s) t
A. If amending name, enter the new name of	f_the corporation:		
name must be distinguishable and contain a "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association," B. Enter new principal office address, if applicable office address MUST BE A STREET (Mailing address MAY BE A POST OFF) D. If amending the registered agent and/or new registered agent and/or the new reg	"Corp," "Inc," or "C " or the abbreviation "F plicable: ET ADDRESS) e: ICE BOX)	12500 Si Miani, P	184 ST L 33177. SW 184 ST T(33177.
Name of New Registered Agent	Frank	ACANDA.	
Name of the Registered rigers	12 500	SW 184 S	T
	(Florida stree	et address)	
New Registered Office Address:	Mian	City)	Florida FL 33177.
New Registered Agent's Signature, if chang I hereby accept the appointment as registered Grand	agent. I am familiar w	ith and accept the obligations of 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 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	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> Name	<u>Addres</u> s
I) Change	PT ULice G Capote	2227 Arthor ST
Add		Hollywood FL
X_ Remove		33040
2) Change		
Add		
Remove		· · · · · · · · · · · · · · · · · · ·
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

If amending or adding additional Arti Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	
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If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	againent 17 not communed in the antenament insert.
· · · · · · · · · · · · · · · · · · ·	
	_ <i></i>
	<u> </u>

The date of each amendment(s) adoption:date this document was signed.	, if other than the
-	
Effective date <u>if applicable</u> : (no more than 90 days aft	er amendment file date)
Note: If the date inserted in this block does not meet the applicable statu document's effective date on the Department of State's records.	story filing requirements, 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. The number of 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 votin must be separately provided for each voting group entitled to vote separately	g groups. The following statement attely on the amendment(s):
"The number of votes cust for the amendment(s) was/were sufficient	
by 100 %.	, 25
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without staction was not required.	hareholder action and shareholder
The amendment(s) was/were adopted by the incorporators without sharel action was not required.	nolder action and shareholder
Dated 12 20 30 7.	
Signature	
(By a director, president or other officer - if dir	
selected, by an incorporator – if in the hands of appointed fiduciary by that fiduciary)	a receiver, trustee, or other court
(Typed or printed name of p	Capote
(Typed or printed name of p	erson signing)
Presi den	T ·
(Title of person	signing)