P1400090714

| (Requestor's Name) |
|---|
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| PICK-UP WAIT MAIL |
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T. LEMIEUX



COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | RATION: NUNEZ CARGO, | INC. | | |
|-------------------------|---|---|------------------------|--|
| DOCUMENT NUMI | BER: P14000090714 | | | |
| | of Amendment and fee are su | abmitted for fili | ng. | |
| Please return all corre | spondence concerning this ma | itter to the follo | wing: | |
| | MARIA E NUNEZ | | | |
| | | Name of Co | ntact Person | n |
| | NUNEZ CARGO, INC. | | | |
| | | Firm/ C | ompany | · · · · · · · · · · · · · · · · · · · |
| | 5131 SW 163RD CT | 1 11110 | ompany | |
| | | Ado | iress | |
| | MIAMI, FL 33185 | | | |
| | | City/ State a | nd Zip Cod | e |
| RSVI | AXACCOUNTING@HOTM | AAII. COM | | |
| | E-mail address: (to be us | | mual report | notifications |
| | is man domess. (iv or a | inca for taxare in | maar report | nonneuton, |
| For further information | n concerning this matter, pleas | se call: | | |
| MARIA E NUNEZ | | | 305 | 951-0364 |
| | of Contact Person | at (| Ama Ca |) 951-0364 de & Daytime Telephone Number |
| Name | of Contact Person | | Area Co | de & Daytine Telephone Number |
| Enclosed is a check fo | r the following amount made | payable to the F | lorida Depa | artment of State: |
| S35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | S43.75 Fil Certified C (Additional enclosed) | opy | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| | ling Address | | | Address |
| | ndment Section sion of Corporations | | | ment Section on of Corporations |
| | Box 6327 | | | Building |
| Talla | | | xecutive Center Circle | |

Tallahassee, FL 32301

Articles of Antendment to Articles of Incorporation of

of FILED

NUNEZ CARGO, INC.

| (Name of Corporation as curren | ntly filed with the Florida Dept. of State) | | |
|---|--|--|--|
| P14000090714 | 77 | | |
| (Document Number | r of Corporation (if known) | | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, th its Articles of Incorporation: | is Florida Profit Corporation adopts the following amendment(s) | | |
| A. If amending name, enter the new name of the corporation: | | | |
| N/A | The new | | |
| name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviation | tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the | | |
| B. Enter new principal office address, if applicable: | 5131 SW 163RD CT | | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | MIAMI, FL 33185 | | |
| | | | |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | 5131 SW 163RD CT | | |
| | MIAMI, FL 33185 | | |
| | | | |
| D. If amending the registered agent and/or registered office ad | Haray in Placida, anton the many of the | | |
| D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre | | | |
| Name of New Registered Agent N/A | | | |
| | | | |
| (Florida : | street address) | | |
| New Registered Office Address: | Florida | | |
| - · · · · · · · · · · · · · · · · · · · | (City) (Zip Code) | | |
| | | | |
| New Registered Agent's Signature, if changing Registered Ager | nt. | | |
| I hereby accept the appointment as registered agent. I am familia | | | |
| | | | |
| | | | |
| 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 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 De | <u>oe</u> | |
|-------------------------------|--------------|----------|--------------------|---------------------------------------|
| X Remove | <u>V</u> | Mike Jo | <u>ones</u> | |
| X Add | <u>SV</u> | Sally Si | mith | |
| Type of Action (Check One) | <u>Title</u> | | <u>Name</u> | <u>Addres</u> s |
| 1) Change | VP | _ | REYMEL GOMEZ NUNEZ | 5131 SW 163RD CT |
| X Add | | | | MIAMI, FL 33185 |
| Remove | | | | |
| 2) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 51 Change | | | | |
| Add | | | | |
| Remove | | | | · · · · · · · · · · · · · · · · · · · |
| 6) Change | | | | |
| Add | | _ | | |
| Remove | | | | |

| E. If amending or adding ad (Attach additional sheets, if | | |
|--|----------------------------------|---|
| N/A | | |
| | | |
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| provisions for implement (if not applicable, ind | ing the amendment if nicate N/A) | ssification, or cancellation of issued shares, ot contained in the amendment itself: FICATION OF ISSUED SHARES FROM MARIA E NUNEZ TO |
| REYMEL GOMEZ NUNEZ. | THE NEW DISTRIBUTI | ON OF SHARES FOLLOWS: |
| | | |
| MARIA E NUNEZ | PRESIDENT | SHARES ISSUED: 70 PERCENTAGE: 70% |
| REYMEL GOMEZ NUNEZ | VICE PRESIDENT | SHARES ISSUED: 30 PERCENTAGE: 30% |
| | | |
| | | |
| | | |

| The second second second | 03/24/2018 | ic a a |
|--|---|---------------------------|
| The date of each amendment(s) addate this document was signed. | option: | , if other than |
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this b document's effective date on the De | ock does not meet the applicable statutory filing requirements, this department of State's records. | ite will not be listed as |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ■ The amendment(s) was/were ado by the shareholders was/were sur | oted by the shareholders. The number of votes cast for the amendment() ficient for approval. | s) |
| | roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): | ent |
| "The number of votes cast | or the amendment(s) was/were sufficient for approval | |
| by | · · · · · · · · · · · · · · · · · · · | |
| · | (voting group) | |
| ☐ The amendment(s) was/were ado action was not required. | oted by the board of directors without shareholder action and shareholde | er |
| ☐ The amendment(s) was/were ado action was not required. | nted by the incorporators without shareholder action and shareholder | |
| 03/24/2018 | | |
| Dated | / | |
| Signature | | |
| (By a di | ector, president or other officer - if directors or officers have not been | |
| | by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary) | rt |
| | MARIA E NUNEZ | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| - | (Title of person signing) | |