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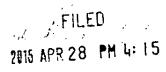
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: OTURA NI	KO TRANSPOR	TINC
DOCUMENT NUME	BER: P1500000299	3	·
	of Amendment and fee are sul		
Please return all corres	pondence concerning this mat	ter to the following:	
	ARRONTE, MIGU	JEL	
	, , , , , , , , , , , , , , , , , , , ,	Name of Contact Persor	1
	0700 FODTH OH	Firm/ Company	
	8706 FORTH SH		
	Orlando, FL 3282	Address	
		City/ State and Zip Code	2
	n concerning this matter, pleas		
Miguel Arron	te		<u>346-1260</u>
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton 26 61 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment

to Articles of Incorporation



OTURA NIKO TRANSPORT INC

(Name of Corporation as currently t	filed with the Florida Dept. of State) 11.95EE. FLORIDA
P15000002993	The second second
(Document Number o	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floridate Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the c	corporation:
	The new
	ord "corporation," "company," or "incorporated" or the abbreviation rp," "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable	
(Principal office address <u>MUST BE A STREET AD</u>	ODRESS)
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE B</u>	(OX)
D. If amending the registered agent and/or registered agent and/or the new registered	tered office address in Florida, enter the name of the
	- Since address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Re	egistered Agent:
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
Signature of 1	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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	VP		LEDUAN AVILA HERNANDEZ	3660 SW 16TH TER
Add				APT 5
Remove				MIAMI FL 33145
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		<u> </u>		
Add				
Pemove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)

f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
·	
	*** Volta dilitaria *** *** *** *** *** *** *** *** *** *

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	_
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
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)	
miquel Arronte	
(Typed or printed name of person signing)	
(Title of person signing)	-
(, tala or barran me	