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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: KOMPAS LOGIST	TICS INC			
DOCUMENT NUMBE	P15000028675				
The enclosed Articles of	Amendment and fee are sub	omitted for filing.			
Please return all correspo	ondence concerning this mat	ter to the following:			
		MARTHA A MUSOLINO			
		Name of Contact Person	1		
_		Firm/ Company			
	3050 SW 136 CT				
_	Address				
	MIAMI. FL 33175				
_		City/ State and Zip Code	e		
	KOMPA	SLOGISTICSINC@GMA	ML.COM		
	E-mail address: (to be us	ed for future annual report	notification)		
For further information (concerning this matter, pleas	e call:			
	MARTHA A MUSOLIN	at (506-4846		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State:		
S35 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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

KOMPAS LOGISTICS INC	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P15000028675	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>E</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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 new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	vet 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 v	vith and accept the obligations of the position.
Signature of New R	egistered 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: 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	MARTHA LACA	3050 SW 136 CT
X Add	-		MIAMI, FL 33175
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	_		
Add			
Remove			

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or an exchange,	reclassificati	<u>on, or cancell</u>	<u>ation of issuer</u>	i shares,	
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ite N/A)					
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	or an exchange, g the amendmen	<u>e the amendment if not cont</u>	<u>g the amendment if not contained in the ai</u>	<u>g the amendment if not contained in the amendment use</u>	or an exchange, reclassification, or cancellation of issued shares, a the amendment if not contained in the amendment itself:

	IMMEDIATELY	, if other than the
The date of each amendment(s) ad date this document was signed.	option:	It other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file d	
	(no more than 90 days after amenament fite d	ate)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirempartment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the afficient for approval.	amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The follo each voting group entitled to vote separately on the amend.	wing statement ment(s):
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action ar	nd shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and sh	areholder
07/26 Dated	5/2018	
Signature,	Yun _	
(By a c	lirector, president of other officer – if directors or officers had by an incorporator – if in the hands of a receiver, trustee, ted fiduciary by that fiduciary)	
	MARTHA A MUSOLINO	
	(Typed or printed name of person signing)	
	PRESIDENT	_
	(Title of person signing)	