# 015000030350

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C. CAKKOTHERS 1102 9 I AON

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATIO	N;PLAC	CE LOGISTICS C	CORP	
DOCUMENT NUMBER:	215000030352			
The enclosed Articles of Amo		bmitted for filing.		
Please return all corresponde	nce concerning this ma	tter to the followi	ng:	
	FER	NANDO OLIVEI	RA TAV	ARES
<del></del>		Name of Cont	act Persor	1
		PLACE LOGIST	ICS COR	P
		Firm/ Cor	npany	
	6925 LAK	KE ELLENOR DI	RIVE SUI	TE 101
<del></del>		Addre	ess	
		ORLANDO, I	FL 32809	
		City/ State and	l Zip Code	:
	bookkeeping@drim	nsolutions.com		
·	-mail address; (to be us	sed for future annu	ual report	notification)
For further information conce	erning this matter, pleas	se call:		
DIOGO PASSO	os	at ( _	407	544-3244 de & Daytime Telephone Number
Name of Contact Person			Area Co	de & Daytime Telephone Number
Enclosed is a check for the fe	llowing amount made	payable to the Flo	rida Depa	ertment of State:
■ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Cop (Additional e- enclosed)	ny	□\$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

#### PLACE LOGISTICS CORP

(Name of Corporation as currently filed with the Florida Dept. of State)			
P15000030352			
(Document Number of Corporation (if known)			
ant to the provisions of section 607 1006. Elavide Statutar, this Florida Profit Cornection adopts the following amendmen			

its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 6925 LAKE ELLENOR DRIVE SUITE 101 B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) ORLANDO, FL 32809 C. Enter new mailing address, if applicable: 6925 LAKE ELLENOR DRIVE SUITE 101 (Mailing address MAY BE A POST OFFICE BOX) ORLANDO, FL 32809 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: GOLDEN HILLS SERVICES, INC. Name of New Registered Agent 6925 LAKE ELLENOR DRIVE SUITE 101 (Florida street address) ORLANDO New Registered Office Address: (City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar $\chi$ ith any accept the obligations of the position	1.

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 Doe			
X Remove	<u>V</u>	Mike Jones			
X Add	$\underline{sv}$	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) X Change	Р	Fernando Oliveira Tavares	6925 Lake Ellenor Dr. Suite 101,		
Add			Orlando, FL 32809		
Remove					
2) Change	V	Viviane Ramos Pacheco Tavares	6925 Lake Ellenor Dr. Suite 101.		
X Add			Orlando, FL 32809		
Remove					
3)Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add	·				
Remove					
6) Change					
Add					
Add					
NUMBER					

	ding or adding additional additional additional sheets, if necessar	y). (Be specific	,			
N/A						
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<u>II an an</u> provisi	endment provides for an o ons for implementing the s	exchange, reclasses emendment if no	ification, or can- t contained in th	<u>cellation of issued</u> e amendment itse	<u>l shares.</u> Elf:	
(if	not applicable, indicate N/A	1)			<del></del>	
N/A						
<u></u>						
<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 after amendment file date)
<b>Note:</b> If the date inserted in this block does a document's effective date on the Department of	not meet the applicable statutory filing requirements, this date will not be listed as the f State's records.
Adoption of Amendment(s) (CF	HECK ONE)
■ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amendment(s) approval.
	ne shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):
	ndment(s) was/were sufficient for approval
by	ting group)
	board of directors without shareholder action and shareholder
action was not required.  Dated 11 06 15	incorporators without shareholder action and shareholder
(By a director, presented, by an inc	sident or other officer – if directors or officers have not been orporator – if in the hands of a receiver, trustee, or other court y by that fiduciary)
	FERNANDO OLIVEIRA TAVARES
	(Typed or printed name of person signing)
	PRESIDENT
<del></del>	(Title of person signing)