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R. WHITE MAR 1 6 2018





## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	KRIS DUMP SEF	RVICES, CORP	
DOCUMENT NUMI	P15000035005 BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	FIDEL FERNANDEZ		
	KRIS DUMP SERVICES, (	Name of Contact Perso.	n
	567 EAST 40 STREET	Firm/ Company	
	HIALEAH, FL 33013	Address	
		City/ State and Zip Cod	e
FID	ELFERNANDEZ1@GMAIL	COM	
	E-mail address: (	to be used for future annua	l report notification)
For further information	n concerning this matter, pleas	e call:	
FIDEL FERNADEZ		786 at (	209-5341
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	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)
Ame Divi P.O	iling Address endment Section ision of Corporations . Box 6327 abassee FL 32314	Amend Division Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to

FILER

•	Articles of Incorporation of	18 HAR 15 AM 8:5
KRIS DUMP SERVICES, CORP		
( <u>Name of Corporation as curre</u> P15000035005	ently filed with the Florida Dept. of State)	अञ्चार । जन्म । जन्म जन्म । जन्म
(Document Nun	ober of Corneration (if known)	

its Articles of

P15000035005	rua bept. or State)	
(Document Number of Corporation (if k	(nown)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this callincorporation:	orporation adopts the following amendment(s) to its	Arti
A. If amending name, enter the new name of the corporation: KRIS LOGISTICS SERVICE CORP	The	mau
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 "P	" "company," or "incorporated" or the abbrevia o". A professional corporation name must contain	tion
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
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 addres	ss in Florida, enter the name of the	
new registered agent and/or the new registered office address:		
Name of New Registered Agent		
(Florida stree	eet 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 wit	th and accept the obligations of the position.	

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> <u>J</u>	ohn Doe	
X Remove	<u>V</u> <u>N</u>	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u> P	Name FIDEL FERNANDEZ	Address 567 EAST 40 ST
1) Change X Add Remove	<u> </u>	- IDEL PENNANDEZ	HIALEAH, FL 33013
2) Change	Р	JUAN FERNANDEZ	567 EAST 40 ST
Add X Remove			HIALEAH
3 ) Change Add		·	
Remove 4) Change Add			
Remove 5) Change			
Add			
6) Change Add			
Remove			

f amending or adding additional Articl (Attach additional sheets, if necessary).	(Be specific)
	-
	La transfer of the state of the
an amendment provides for an exchan rovisions for implementing the amendr	nge, reclassification, or cancellation of issued shares, ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

date this document was signed. 01/01/2018	, if other than the
01/01/2018	
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.	
03/08/2018	
Dated	
Signature 10-k	
(By adirector, 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)	
JUAN FERNANDEZ	
(Typed or printed name of person signing)	<b></b>
PRESIDENT	
(Title of person signing)	_