P15000048286

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COVER LETTER

TO: Amendment Section Division of Corporations

	i	
NAME OF CORPORATION: MAFREPA	CA LOGISTICS INTERNATIONAL, CO	
DOCUMENT NUMBER: P15000	48286	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Eduardo	Dolfschi	
	Name of Contact Person	
Haltechi Ro	Name of Contact Person CO. LLC Firm/ Company	
<u> Vertson a · </u>	Firm/ Company	
1425 Mai	n Street	
	Address	
SARASOTA		
- SREASO IA	FL 34236 City/ State and Zip Code	
<u>rae velt</u>	d for future annual report notification)	
E-mail address: (to be use	d for future annual report notification)	
For further information concerning this matter, please	call:	
MI TO MALL	dul soa lour	
<u><u><u></u> <u><u></u> <u><u></u> <u> </u></u></u></u></u>	at (941) 228 1245	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:	
\$35 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed) C\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address	Street Address	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	
	Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of



MAFREPACA LOGISTICS INTERNATIONAL (Name of Corporation as currently filed with the Florida Dept. of State) 5000048286 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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." 4652 Fruitville Rd. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Sarasola, FL C. Enter new mailing address, if applicable: 4652 Fruituille la (Mailing address MAY BE A POST OFFICE BOX) Sarasota, FL 34232 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: Name of New Registered Agent New Registered Office Address: 4652

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I_l am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

P = President; V = Vice Executive Officer; CFO held. President, Treasure Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove	President = Chief I er, Directe in the fo	Financial Officer. Or would be PTD. Ilowing manner. C Orporation, Sally S	Secretary; D= Director; TR= Tru If an officer/director holds more the urrently John Doe is listed as the PS with is named the V and S. These sh	istee; C = Chairman or Clerk; CEO = Chief an one title, list the first letter of each office ST and Mike Jones is listed as the V. There is ould be noted as John Doe, PT as a Change,
Example: X Change	<u>PT</u>	John Doe		
X Remove	Y	Mike Jones		
_X Add	<u>\$V</u>	Sally Smith		
Type of Action (Check One)	Title	Name		Address
1) Change	VP	CES	IR ENRIQUE CORREDOR	7532 ANDORA DRIVE
Add Remove		1		SARASOTA, FL 34238
2) X Change	P	JAI	ROA ROSALES SAL	•
Add Remove				Sarasota, FL 34232
3) Change				
Add		, 		
Remove				
4) Change			-	
Add				
Remove			-	
5) Change				:
Add			-	
Remove			-	
6) Change		_		
Add		4	-	
Remove			-	
			Page 2 of 4	

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:

Please note the officer/director title by the first letter of the office title:

(Attach additional sheets, if necessary)

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on amendment provides for an evel-	onae mel	assification, or cancellation of issued shares,
provisions for implementing the amen	dment if	not contained in the amendment itself:
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provisions for implementing the amen	adment if	not contained in the amendment itself:

The date of each amendment(s) add date this document was signed.	ption:		, if other than the
Effective date if applicable:	(no more than 00 d	ays after amendment file date)	
	(no more mun yo ac	ays after amenament frie unie)	
Note: If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicable runent of State's records.	le statutory filing requirements, this d	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopty by the shareholders was/were suff	ed by the shareholders. The nu- cient for approval.	imber of votes cast for the amendment	(s)
		h voting groups. The following statem e separately on the amendment(s):	ent
"The number of votes cast fo	the amendment(s) was/were su	afficient for approval	
by	(voting group)	.35	
	(voting group)		
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors with	hout shareholder action and sharehold	er
The amendment(s) was/were adopt action was not required.	ed by the incorporators without	shareholder action and shareholder	
Dated	7/7/16		
Signature			
selected,		if directors or officers have not been ands of a receiver, trustee, or other countries.	rt
_	JAIRO	ROSAUES e of person signing)	
	Presid	dent	
	(Title of pe	erson signing)	·