P15000058851

(Re	equestor's Name)	
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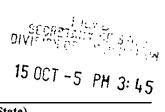
OCT 6 2015 CLEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: RODSSON CORP				
DOCUMENT NUMB	ER: P15000058851				
	of Amendment and fee are su	bmitted for filing.			
Please return all corresp	pondence concerning this ma	tter to the following:			
		ALBA E VIVAR	is Controlled (1985)		
-		Name of Contact Persor			
	MIAMI D	ISPATCH & CARRIER SI	ERVICES		
-		Firm/ Company			
	80	40 NW 95TH ST STE 106			
-		Address			
	HIAI	LEAH GARDENS, FL 330	16		
-		City/ State and Zip Code	•		
	F-mail address: (to be us	sed for future annual report	notification)		
	L-man address. (w be u.	sed for fatare annual report	notification)		
For further information	concerning this matter, pleas	se call:			
ALBA E VIVAR		305	822-0255		
Name o	f Contact Person	at (de & Daytime Telephone Number		
			•		
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment 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)		
<u>M</u> ail	ing Address	Street.	Address		
Ame	ndment Section	Amendment Section			
	sion of Corporations		n of Corporations		
	Box 6327 hassee, FL 32314		Building xecutive Center Circle		
I dila	1140000, 1 12 J2J17		issee, FL 32301		

Articles of Amendment Articles of Incorporation RODSSON CORP



(Name of Corporation as current				
<u> </u>	ly filed with the Florida Dept. of State)			
P1500005	8851			
(Document Number o	f Corporation (if known)			
resuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following amendment			
If amending name, enter the new name of the corporation:				
	The new			
me must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or 'ord "chartered," "professional association," or the abbreviation "	'Co". A professional corporation name must contain the			
Enter new principal office address, if applicable:	570 E 57 ST			
rincipal office address <u>MUST BE A STREET ADDRESS</u>)	HIALEAH, FL 33013			
Enter new mailing address, if applicable:	570 E 57 ST			
(Malling address MAY BE A POST OFFICE BOX)	HIALEAH, FL 33013			
If amending the registered agent and/or registered office add new registered agent and/or the new registered office address				
new registered agent and/or the new registered office address				
Name of New Registered Agent	<u>s</u>			
Name of New Registered Agent				

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	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s			
1) Change	VP	KARINA M HERNANDEZ	570 E 57 ST			
Add			HIALEAH, FL 33013			
X Remove						
2) Change						
Add			4			
Remove						
3) Change			_			
Add						
Remove						
4) Change						
Add						
Remove						
Rollovo						
5) Change		_	_			
Add						
Remove						
6) Change						
Add						
Remove						

ttach additional sheets	additional Art , if necessary).	(Be speci	ific)	<u>161 6</u> ,			
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an amendment provi provisions for implem	enting the amo	hange, recla endment if	assification, not contain	or cancella ed in the an	<u>ition of issu</u> iendment it	ed shares. self:	
(if not applicable, i	ndicate N/A)						
		N	A_				
							

. 09/30/2015	
The date of each amendment(s) adoption:	if other than the
date this document was signed.	VIETNOS TERROS ANT
09/30/2015	The state of the s
Effective date if applicable:	5 OCT -5 PH 3: 45
(no more than 90 days after amendment file date)	3 001 3 111 3.43
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendme by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	e ment
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(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. 	
•	
09/30/2015 Dated	
Signature	
(By a director, president or other officer – if directors or officers have not be	en
selected, by an incorporator – if in the hands of a receiver, trustee, or other c	
appointed fiduciary by that fiduciary)	
CARLOS A RODRIGUEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	