P15000018027

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TO: Amendment Section

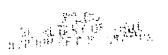
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: EURERA LOGISTICS, INC. DOCUMENT NUMBER: ___ P.15000078027 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Firm/ Company MLENGHEAR YAHOO. COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



2016 OCT 25 PM 2: 34

EUREKA LOGISTICS, INC. (Name of Corporation as currently filed with the Florida Dept. of State)

P150000	<u> </u>
	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	701 THREE ISLANDS BLUD
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Suite 206
	HALLANDAGE BEACH, FL 3309
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	701 THREE ISLANDS BLVD
	Suite 706
	HALLANDALE BEACH, FL 33009
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent MONA L	EPGHEA
	ISLANDS BLUD SUITE 206 reet address)
New Registered Office Address: 1AUANDAU	E 3EACH , Florida 33009
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position.
Wa	
Signature dy New I	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:	re, unu su	any oman, or as an maa.	
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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change	P	DANIEL LENGHEA	13899 BISCAYNE BLVD
Add Remove			SUITE 415 PORTH MIAMI BEACH, FL33181
2) Change	P	MONA LENGHEA	701 THREE ISLANDS BLUD
Add Remove			SUITE 206 HALLANDALE BEACH, FL 33009
3)Change			
Add			
Remove			
4) Change			
Add			
5) Change		_/	
Add Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary)	
•	N/A
G	
	<u></u>
f an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
provisions for implementing the am	nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(3	NIA
——————————————————————————————————————	

The date of each amendment(s) adoption:	SEPTEMBER	8,2016	, if other than the
date this document was signed.			A Company
Effective date if applicable:			THE OF EDER WITH
<u></u>	(no more than 90 days after am	endment file date)	2016 OCT 25 PM 2: 34
Note: If the date inserted in this block does r document's effective date on the Department of		iling requirements,	this date will not be listed as the
Adoption of Amendment(s) (CF	IECK ONE)		
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of vote approval.	s cast for the amend	lment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting			
"The number of votes cast for the ame	ndment(s) was/were sufficient for	approval	
by		,,,	
(vo	ting group)		
☐ The amendment(s) was/were adopted by the action was not required.			
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder	action and sharehol	der
Dated SEPTEMBE	e 8,2016		
(By a director, pres	ident or other officer – if directors or or or if in the hands of a receive by that fiduciary)		
	DANIEL LENGHEA		
	(Typed or printed name of person	ei8mu8)	
	PRESIDEN	<u> </u>	
	(Title of person signing	g)	