UL/26/2015/CUE_01:23 PM	FAX No.
7/26/2016	Division of Conformington
	Plorida Department of State
	Division of Corporations
	Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000179274 3)))



H160001792743ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

JUL 26 AH S: 4 HS JUL 26 To: Division of Corporations Fax Number : (850)617-6380 From: AUN RESE Account Name : EXPRESS CORPORATE FILING SERVICE INC. Account Number : I2000000146 Phone : (305)444-4994 Fax Number : (305)444-4977 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.***## Email Address: £. iTI ÷., Ņ ŝ 52 COR AMND/RESTATE/CORRECT OR O/D RESIGN

LOG&C SMART, INC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help JUL 27 2016 C LEWIS

P. 001/005

ł

1/1

. JUL/26/2016/TUE 01:23 PM

FAX No.

FILED P. 002/005 FILED P. 002/005 SECRETARY OF STATE DIVISION OF CORFORATION

2016 JUL 26 AM 9:41

Articles of Amendment to Articles of Incorporation of

LOG&C SMART, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P16000011934

(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:

The new mass 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."

. B. Enter new principal office address. if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)

- 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 address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent
(Florida strest address)

New Registered Office Address: ______, Florida

(Zip Code)

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

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

Signature of New Registered Agent, if changing

JUL/26/2016/TUE 01:23 PM

FAX No.

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, SY as an Add. Example:

Example: X Change	<u>PT</u>	<u>John Doe</u>		
XRemove	Σ	Mike Jones		
<u> </u>	<u>sv</u>	Sally Smith		
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address	
1) Change	D	Francisco Javier Barato Moreno	8645 SW 185 street Cutler Bay	
XAdd			Miami, PL 33157	
Remove				
2) Change	S	German Quevedo	8645 SW 185 street Cutler Bay	
X Add			Miami, FL 33157	
Remove				
3)Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change			······	
Add				
Remove				
6) Change				
Add		•	—	
Remove				

Page 2 of 4

JUL/26/2016/TUE 01:23 PM

. .

.

.

.

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)

__-

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

JUL/26/2016/TUE 01:23 PM

FAX	No,
-----	-----

P. 005/005

, if other than the

广北	
SURFEARY OF COMP.	
JEVISION OF CORPORATION	

2016 JUL 26 AM 9: 41

The date of each amendment(a) adoption: _07/25/16 date this document was signed.

Effective date if applicable:

(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.
- D The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

07/25/20	016	
Dated		
/	T) Allen	_ ,
Signature	STON PM'S	
(By a	director, president or other office	r - if directors or officer

(By a director, 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)

SILVANA VEGA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)