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C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: KNYTHE RHYDA	AH TRANSPORT INC	
DOCUMENT NUM	D1/000010501		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	RAY MCGHEE		
		Name of Contact Person	1
	MCGHEE ACCOUNTING		
		Firm/ Company	
	5914 JOHNSON STREET		
		Address	
	HOLLYWOOD, FL 33021		
	,	City/ State and Zip Code	2
rmcg	hee-epa@mcgheeaccounting.c	com	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	926-5374
Name	of Contact Person		de & Daytime Telephone Number
	or the following amount made		
\$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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Bassee, FL 32301

Articles of Amendment to Articles of Incorporation of

to

KNYTHE	RHYDAH	TRANSPORT I	INC.

(Name	of Corporation as curren	tly filed with the Florida Dept. of S	State)
P16000019521			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts	the following amendment(s
A. If amending name, enter the new na	ame of the corporation:		
KNYTHE RHYDAH LOGISTICS INC			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corporation	l" or the abbreviation name must contain the
B. Enter new principal office address,	if annlicable:	NA	
(Principal office address MUST BE A S			669
			S
			<u> </u>
C. Enter new mailing address, if appli	icable:	NA	
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	IVA	100 m
			<u>ي</u> ا
D. If amending the registered agent an new registered agent and/or the new			the
Name of New Registered Agent	NA		
	(Florida s	street address)	
New Registered Office Address:	NA	Clar	iida
<u>New Regisierea Office Adaress</u> :		, Floi <i>(City)</i>	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Ager	nt:	
I hereby accept the appointment as regist	tered agent. I am familia	r with and accept the obligations of t	he position.
NIA			
	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>	John Do	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) NA Change		_		
Add				
Remove				
2) NA Change	-	_		
Add				
Remove				
3) NA Change				
Add		_		
Remove				
4) NA Change				
				
Add Remove				
5) NA Change		_		
Add				
Remove				
6) NA Change				
		_		
Add				
Remove				

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16	have a least the standard and the second standard and the second standard at the second sta
If an amendment provides for an exclusions for implementing the ame	change, reclassification, or cancellation of issued shares,
provisions for implementing the amo	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the amo (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the amo (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself:

The date of each amendment(s) adoption date this document was signed.	on:	, if other	than the
· 🚱	13/2011		
Effective date if applicable:	(no more than 90 c	days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departn		ble statutory filing requirements, this date will not be list	ed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted by the shareholders was/were sufficient		number of votes cast for the amendment(s)	
☐ The amendment(s) was/were approved must be separately provided for each		gh voting groups. The following statement ote separately on the amendment(s):	
"The number of votes east for th	* *	• •	
by			
	(voting group)		
☐ The amendment(s) was/were adopted action was not required.	by the board of directors w	vithout shareholder action and shareholder	
☐ The amendment(s) was/were adopted action was not required.	by the incorporators withou	ut shareholder action and shareholder	
DatedQ	12016		
Signature Mic	hael Ray	ulds	
		r – if directors or officers have not been hands of a receiver, trustee, or other court	
	duciary by that fiduciary)	mands of a receiver, trustee, or other court	
MIC	HAEL REYNOLDS		
_	(Typed or printed na	nme of person signing)	•
(President		
	(Title of	person signing)	