P16000045960

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	NAMASTE TRU	CKING, CORP	
DOCUMENT NUMI	BER: <u>P16000045960</u>		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	OMAIDA DIAZ MARTII	NEZ	
	NAMASTE TRUKING,	Name of Contact Person	1
	10460 SW 5TH ST	Firm/ Company	
	MIAMI, FL 33174	Address	
		City/ State and Zip Cod	e
	E-mail address: (to be used for future annua	l report notification)
For further information	n concerning this matter, pleas	se call:	
OMAIDA DIAZ MA	ARTINEZ	ot (786) 470 0884
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment 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)
Am Div P.C	endment Section ision of Corporations Box 6327 lahassee, FL 32314	Ameno Divisio Cliftor	Address diment Section on of Corporations n Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATION:

NAMASTE TRUCKING, CORP

2016 MAY 31 PM 1:53

P16000045960			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Flor	rida Statutes, this corporatio	n adopts the following ame	endment(s) to its Articles o
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Cotword" or the word "chartered," "professional association," or the	rp," "Inc," or "Co". A pr	nny," or "incorporated" ofessional corporation na	or the abbreviation ne must contain the
3. Enter new principal office address, if applicable of the principal office address MUST BE A STREET AL			
			
C. Enter new mailing address, if applicable:	•		
(Mailing address <u>MAY BE A POST OFFICE B</u>	<u></u>		
	<u></u>		
D. If amending the registered agent and/or regist new registered agent and/or the new registere		ida, enter the name of the	:
Name of New Registered Agent			
	(Florida street addres	s)	
New Registered Office Address:		, Florida	
	(City)	(Z	p Code)
New Registered Agent's Signature, if changing Re	egistered 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 <math>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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	s 	LIZARDO OSORIO	10460 SW 5th St Miami, FL 33174
X Add			
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

•	If amending or adding additional Articles, enter change(s) here:
	(Attach additional sheets, if necessary). (Be specific)
_	
_	
_	
-	
_	
-	
	If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
٠	provisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
	() 11
_	
_	

The date of each amendment(s) ado	ption:	, if other the	nan the
date this document was signed. Effective date if applicable:	05/25/2016	FIL SECRETARY SIVISION OF CO	EU 'OF STATE DRPORATION:
	(no more than 90 days after amendment file date)	-2016 MAY 31	PM 1:53
Adoption of Amendment(s)	(CHECK ONE)		
■ The amendment(s) was/were adopted by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.		
	ved by the shareholders through voting groups. The following statement such voting group entitled to vote separately on the amendment(s):		
"The number of votes cast for	r the amendment(s) was/were sufficient for approval		
by	(voting group)		
☐ The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and shareholder		
☐ The amendment(s) was/were adopted action was not required.	ed by the incorporators without shareholder action and shareholder		
Dated05/25/20	16		
se je cted, i	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary)		
	OMAIDA DIAZ MARTINEZ		
	(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·	
	PRESIDENT		
	(Title of person signing)		