# P16000047764

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	AATION: CARGO MASTER	R LOGISTICS INC	
DOCUMENT NUMB			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	FERNANDO VELA		
		Name of Contact Person	n
	CARGO MASTER LOGIST	ICS INC	
		Firm/ Company	
	8443 NW 68 STREET	Time Company	
,	<del>,</del>	Address	
	MIAMI FL 33166		
•		City/ State and Zip Cod	e
FFD	(ANDO 1/EL ACCARCONA	CTTDING COM	
FERN	ANDO.VELA@CARGOMA		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
FERNANDO VELA		786 at (	397-7230
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Thildhassee, Fl. 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

## CARGO MASTER LOGISTICS INC

	tly filed with the Florida Dept. of Stat	<b>E</b> )		
P16000047764				
(Document Number	of Corporation (if known)		•	
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	s Florida Profit Corporation adopts the	following a	amendn	nent(s)
A. If amending name, enter the new name of the corporation:				
		n	*L	
name must be distinguishable and contain the word "corporati" ("Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation nan	or the abb	The ne reviation ntain th	on
3. Enter new principal office address, if applicable:	8443 NW 68 STREET			
Principal office address <u>MUST BE A STREET ADDRESS</u> )	MIAMI, FL 33166			
		<del></del> .		•
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8443 NW 68 STREET	ALT S	انال 17	Υŧ
	MIAMI, FL 33166	- :-	10	, ,
		· · · · · · · · · · · · · · · · · · ·	) PH	· '( )~
<ol> <li>If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address</li> </ol>		2 2 1 1	H 6: 52	, ,
Name of New Registered Agent				
(Florida si	treet address)	<del></del>		
New Registered Office Address:	, Florida			
	(City)	(Zip Co	de)	
New Registered Agent's Signature, if changing Registered Agen				
hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the p	osition.		

# 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>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			·····
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	<del></del> -		
Remove			
6) Change			
Add			<del></del>
Remove			

	or adding additional A ional sheets, if necessary	v). (Be specific)			
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	ment provides for an e	xchange, reclassific	ation, or cancellatio	n of issued shares,	
If an amend	for implementing the a			MINETIL RISCH.	
provisions (	for implementing the a applicable, indicate N/A)	<u>mendment ir not co</u> )	memen in the amen		
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The date of each amendment(s) adoption: date this document was signed.	_, if other than the
Effective date if applicable:  (no more than 90 days after amendment file date)	<del></del>
(no more than 50 days after amenament fite date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will a document's effective date on the Department of State's records.	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 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)	17
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.	o Pil
07-01-201 Dated	6: 52
Signature	_
(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)	_
FERNANDO VELA	
(Typed or printed name of person signing)	
GENERAL MANAGER	
(Title of person signing)	