P16000050922

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THE STATE OF STATE OF

JUL 0 6 2016

C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: N.F. LOGISTICS	INC.	
DOCUMENT NUMB	D1 (000050022		·········
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
,	YAINADIS NADAL		
_	,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	Name of Contact Person	1
1	N.F. LOGISTICS INC.		
_		Firm/ Company	
5	501 STANTON STREET		
-	 -	Address	
(CLEWISTON, FL 33440		
_		City/ State and Zip Code	
DAKO	TATAX@GMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
YAINADIS NADAL		786	366 9166
Name of	Contact Person	Arca Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment 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)
	ng Address adment Section		Address ment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

N.F. LOGISTICS INC.				
(Name of Corporation as curren	tly filed with the Florida Dept. of State)			
P16000050922		,		
(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the fol	lowing amendment(s) to		
A. If amending name, enter the new name of the corporation:				
9 10 - 1		- (P-0)		
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	CLEWISTON, FL 33440			
	——————————————————————————————————————	<u> </u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	501 STANTON STREET			
	CLEWISTON, FL 33440			
·				
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre				
(Florida s	street address)			
New Registered Office Address:	, Florida (City)	(Zip Code)		
	· ·			
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	nt: r with and accept the obligations of the posi	tion.		
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	ones .	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP		RUBEN MEDINA	501 STANTON STREET
X Add				CLEWISTON, FL 33440
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
O CL				
6) Change		_		
Add				
Remove				

reach untimonal sneets, if	ditional Articles, enter of necessary). (Be specifically appears)	ic)		
		-	m - 114 - 1174 - 1144 - 1	MACALLA
If an amendment provides provisions for implement (if not applicable, indi	ting the amendment if n	ssification, or cancellation of contained in the amer	on of issued shares, adment itself:	

	06/21/2016	
The date of each amendment(s) a date this document was signed.	doption:	, if other than th
	21/2016	
Effective date if applicable:	(no more than 90 days after amendment file date	?)
Note: If the date inserted in this I document's effective date on the De	plock does not meet the applicable statutory filing requirement partment of State's records.	ts, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the am afficient for approval.	endment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and s	shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and share	holder
06/21/2016	1	
Dated Signature	Jula da	
(By a c	irector, president or other officer - if directors or officers have	
	d, by an incorporator — if in the hands of a receiver, trustee, or election ted fiduciary by that fiduciary)	other court
	YAINADIS NADAL	
	(Typed or printed name of person signing)	
	Prosport	
	(Title of person signing)	