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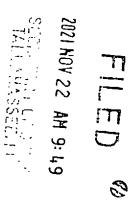
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C. BRUMBLEY
UEÜ 13 2021

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Nationwide Transp	portation & Logistics Inc		
	BER: P16000067810			
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	Sojha Husien Cruz			
		Name of Contact Person	1	
	Firm/ Company			
	4671 Cypress River Rd			
		Address	*	
	Saint Cloud, FL 34772			
		City/ State and Zip Code	e	
	transportwithnationwide@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
Sojha Husien Cruz		at (973-9082	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div P.C	iling Address tendment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amend Division The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	

Articles of Amendment to Articles of Incorporation of

NATIONWIDE TRANSPORTATION & LOGISTIC INC

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

(Name of Corporation as	currently filed with the Florida Dept. of State)
P16000067810	
(Document N	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	ration:
	The new
	ation," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word on "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<u> </u>
	50 N
	<u> </u>
C. Enter new mailing address, if applicable:	₹ ₹ 71
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	Contract to the contract to th
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent	
	Florida street address)
ar .	riorida street dadress)
New Registered Office Address:	, Florida
	(Lip Coue)
New Registered Agent's Signature, if changing Registere	
I hereby accept the appointment as registered agent. I am f	familiar with and accept the obligations of the position.
Signature e	of New Registered Agent, if changing
Chook if applicable	

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	PT	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
I) Change	COO	Arsenio Aquino	4750 Salamander Street
Add			Saint Cloud. FL 34772
X Remove 2) Change	CFO	Liz Valerie Maldonado Cordero	4750 Salamander Street
Add			Saint Cloud, FL 34772
X Remove 3) Change	<u>s</u>	Brian Fedier Gonzalez Maldonado	4750 Salamander Street Saint Cloud, FL 34772
Add X Remove			
4) Change			
Add Remove			
5) Change Add			
Remove 6) Change			
Add			
Remove			

,	
: <u>If amen</u> (Attach <i>c</i>	ling or adding additional Articles, enter change(s) here: dditional sheets, if necessary). (Be specific)
	
provisi	endment provides for an exchange, reclassification, or cancellation of issued shares, ons for implementing the amendment if not contained in the amendment itself: not applicable, indicate N/A)
-	

	adoption:	, if other than the
date this document was signed. If the sign of the sig	1/11/2021	
	(no more than 90 days after amendment file da	ite)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirem Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shar	eholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the a sufficient for approval.	amendment(s)
	approved by the shareholders through voting groups. The follow for each voting group entitled to vote separately on the amenda	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
DatedSignature(By selection	a director, president or other officer – if directors or officers has cited, by an incorporator – if in the hands of a receiver, trustee, or	ve not been
	ointed fiduciary by that fiduciary)	oner court
	Sojha Husien Cruz	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	