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ALLAHASSEE FLORIN

COVER LETTER

TO: Amendment Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations			
NAME OF CORPORATION: _	WS	Carrier	Corp
DOCUMENT NUMBER:			1
The enclosed Articles of Amendme	ent and fee are su	bmitted for filing.	
Please return all correspondence co	ncerning this mat	tter to the following:	
	N;e	bla Yaim Name of Contact Pc	erson
	2 W	Carrier	Corp.
25.	10 6	Carrier Firm/Company 56 St. Address	#2104
	Hia lea	Address A FL. 3 City/ State and Zip (330/6
		City/ State and Zip (Code
Yo	kimeniz	ebla 83 @	yahoo, com
E-mail :	address: (to be us	ed for future annual rep	oort notification)
For further information concerning	this matter, pleas	e call:	
Niebla Yaim	٤	at (<u>78</u>	6 416-4297
Name of Contact Pe	rson	Area	Code & Daytime Telephone Number
Enclosed is a check for the following	ig amount made p	payable to the Florida D	Department of State:
	5 Filing Fee & icate of Status	☐\$43.75 Filing Fee a Certified Copy (Additional copy is enclosed)	& S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Sect Division of Corpo P.O. Box 6327	ion	Am Div	eet Address endment Section rision of Corporations fton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

2 W	Carrier	Corp.

(Name of Corporation as currently filed with the Florida Dept. of State)

P16000069298 (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation	<u>:</u>
N/A	The new
name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviati	ation," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the on "P.A."
B. Enter new principal office address, if applicable:	25/0 W. 56 St. +2/04
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	2510 W. 56 St #2104 Hialeah, Fl 330/6
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2510 W. 56 St. #2104 Itialeah Fl. 33016
	Itialeah Fl. 33016
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add	
Name of New Registered Agent Niebla	Yaime
Z510 W (Florid	56 st. #2104 a street address)
New Registered Office Address: Itialea	η Florida 33016 (City)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famil	
Mult	De Revistered 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:	ve, ana san	iy 3mun, 3v as an 4aa.	
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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	William S Santos	1665 N 56 St.
Add			Hialeah, Fl. 33012
X_ Remove			
2) Change	<u></u>	Niebla Yaime	25/0 W. 56 St. #2100 Hialeah, 196. 330/6
-X Add			Hialeah, FL. 33016
Remove			
3) Change			
Add			
Remove			
4) Change	_		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) N/A		ional sheets, if necessary). (Be specific)	
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(if not applicable, indicate N/A)	<u>f an amend</u> provisions (ment provides for an exchange, reclassification, or cancellation of issued shi	ares,
	(if not a	ipplicable, indicate N/A)	
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			<u></u>

The date of each amendment(s) adoption: _	11-20-2018	if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirements, of State's records.	this date will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes east for the amend approval.	dment(s)
	he shareholders through voting groups. The following ag group entitled to vote separately on the amendment().	
"The number of votes cast for the ann	endment(s) was/were sufficient for approval	
by	oting group)	
(v	oting group)	
☐ The amendment(s) was/were adopted by th action was not required.	e board of directors without shareholder action and sha	reholder
The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action and shareholder	lder
DatedSignature	11-70-7018	
selected, by an inc	sident or other officer – if directors or officers have no corporator – if in the hands of a receiver, trustee, or oth ry by that fiduciary)	
	William S Santos (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	·
	President (Title of person signing)	
	(Title of person signing)	