P16000092 917

(F	Requestor's Name)
(<i>t</i>	Address)
	Address)
(0	City/State/Zip/Phone #)
PICK-UP	MAIL MAIL
(E	Business Entity Name)
-	Occument Number)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MONTOYA LOG	ISTICS CORP	
DOCUMENT NUM	P16000092917		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	uer to the following:	
	HUMBERTO GONZALEZ		
		Name of Contact Person	1
	RAPID INCOME TAX COR	AP	
		Firm/ Company	
	11300 NW 87 CT UNIT 150		
	· · · · ·	Address	
	HIALEAH GARDENS FL 3	3018	
		City/ State and Zip Cod	2
1,1,0	ТАХ@ҮАНОО.СОМ		
		sed for future annual report	notification)
For further information	on concerning this matter, please	786	2908649
Name	of Contact Person	at (Area Co	de & Daytime Telephone Number
Enclosed is a check t	or the following amount made		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 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 Tallahassee, Fl. 32314		Amenc Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle
		Tallah	assee, FL 32301

Articles of Amendment to Articles of Incorporation of

MONTOYA LOGISTICS CORP

2019 CCT 31 PH 4: 02

(Name of Corporation as currently	filed with the Florida Dept. of State)
P16000092917	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this I its Articles of Incorporation:	Horida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	Thenew
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "C word "chartered," "professional association," or the abbreviation "I	"o". A professional corporation name must contain the
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)	
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
Name of New Registered Agent	
Mine by the regime of the regi	
(Florida stre	et 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 familiar w	ith and accept the obligations of the position.
Signature of New R	egistered 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 Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>8V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	C.q	JOSE C AGUIRREGAVIRIA	1570 W 35 PLACE
X Add			HIALEAH FL 3301 2
Remove			
2) Change	O,9	KENYA V MONTOYA	1570 W 35 PLACE
Add			HIALEAH FL 33012
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary)	(Be specific)			
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	11,			
				
				.
· ·	<u> </u>			
		-		
f an amendment provides for an exc	hange, reclassification.	or cancellation of issu	ed shares.	
provisions for implementing the amo (if not applicable, indicate N/A)	andment it not containe	a m the amenument ii	<u>.seii:</u>	
,				_
			_ -	

10/09/2019	
The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	ill 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 east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ 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.	
10/19/2019	
Dated	
Service of the servic	
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)	
KENYA V MONTOYA	
(Typed or printed name of person signing)	
P.D. C. DON	
Critle of person signing)	