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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PETROLEUM LO	OGISTICS SERVICE USA, INC
DOCUMENT NUMBER: P16000099746	
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this m	atter to the following:
JOSE HUMBERTO LOZADA	
	(Name of Contact Person)
PETROLEUM LOGISTICS SERVICE USA, INC	
	(Firm/ Company)
1519 NW 82nd AVE	
	(Address)
DORAL, FLORIDA 33126	
	(City/ State and Zip Code)
jlozada@petrologservice.com	
E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, ple	ase call:
JOSE HUMBERTO LOZADA	305 7133182
(Name of Contact Per	son) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Stan	& □\$43.75 Filing Fee & □\$52.50 Filing Fee Less Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PETROLEUM LOGISTIC SERVICES USA. INC

TETROLEOW LOCISTIC SERVICES USA, INC		
(Name of Corporation as	currently filed with the I	Florida Dept. of State)
P16000099746		
(Documer	nt Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida Not</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:	
PETROLEUM LOGISTICS SERVICE USA, INC		Th.,
name must be distinguishable and contain the word "a "Company" or "Co." may not be used in the name.	corporation" or "incorpor	The neated" or the abbreviation "Corp." or "Inc.
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADI		
<u> </u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO		
	<u> </u>	
D. If amending the registered agent and/or register	rad office address in Flori	ide enter the name of the
new registered agent and/or the new registered		ida, enter the name of the
Name of New Registered Agent		
_	· · · · · · · · · · · · · · · · · · ·	(Plusida esperado es
New Registered Office Address.		(Florida street address)
		F1 11
<u> </u>	(City)	Florida (Zip Code)
	·	(,
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent:	cant the obligations of the position
i neress accept the appointment as registered again.	i am jaminar wiin ana acc	ept the ootigutions of the position.
<u>{ </u>	Signature of New Re	gistered Agent, if changing
	Signature of Hen Ke	
		SEP SEP
	Page 1 of 4	- 5
	- mg 1/4 - 1	m _C
)

If amending the Officer address of each Officer				Scer/director being removed and title, name, and
(Attach additional sheets,				
Please note the officer/dir			 etter of the office title:	
P = President; V= Vice P	resident;	T= Treasure	S= Secretary; D= Director: TR=	= Trustee; C = Chairman or Clerk; CEO = Chief
Executive Officer; CFO =	Chief Fi	inancial Offic	er. If an officer/director holds mor	e than one title, list the first letter of each office
held. President, Treasure	r, Directo	or would be P	TD. 11	
				the PST and Mike Jones is listed as the V. There is
Mike Jones, V as Remove				ese should he noted as John Doe. PT as a Change,
		•		
Example:	DT			
X Change	<u>PT</u>	John Doe		
X Remove X Add	<u>V</u> <u>SV</u>	Mike Jones		
<u>A</u> Aud	<u>3 Y</u>	Sally Smith		
Type of Action	Title	<u>Na</u>	nc Tr	<u>Addres</u> s
(Check One)				
1) Change			<u> </u>	
Add				
Remove				
2) Change				
		_		
Add				
Remove				
3) Change		_		
-				
Add				
Remove				
4) Change				
Add				
Remove				
				
5) Change		_		
Add				
Remove				
6) Change		_	<u> </u> 	
Add				
			\ 1	

____ Remove

E. If amending or adding additional Articles,	enter change(s) here:
(attach additional sheets, if necessary). (Be	specific)
	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
	1
	1
	<u></u>

The date of each amendment(s) adoption:	, if other than the
Effective date <u>if applicable</u> :	
(no mb	re than 90 days after amendment file date)
Note: If the date inserted in this block does not make document's effective date on the Department of Si	neet the applicable statutory filing requirements, this date will not be listed as the tate's records.
Adoption of Amendment(s) (CHE	CK ONE)
The amendment(s) was/were adopted by the was/were sufficient for approval.	members and the number of votes cast for the amendment(s)
There are no members or members entitled to adopted by the board of directors.	byote on the amendment(s). The amendment(s) was/were
Dated AUGUST 15th 2011	
Signature	
	hairman of the board, president or other officer-if directors an incorporator — if in the hands of a receiver, trustee, or ciary by that fiduciary)
	(Typed or printed name of person signing)
PRESIDENT	
	(Title of person signing)
	II .