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JUN 1 9 2017 T. LEMEUX M

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:			
The enclosed Articles of Amenda			
Please return all correspondence of	concerning this mat	ter to the following:	
——————————————————————————————————————	Pelicible 1911 HL M	Name of Contact Person Firm/ Company White D Address City/ State and Zip Code	Conp.
For further information concerning	g this matter, please	e call:	
LIZBEHE MIL	<u>UO</u> Person	at (<u>786</u> Area Coo	be & Daytime Telephone Number
Enclosed is a check for the follow	ring amount made p	ayable to the Florida Depa	rtment of State:
	.75 Filing Fee & ificate 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)
Mailing Addre Amendment Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	Amendi Division Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

οf

Pelicible 1 Transport Co	Ψ			
(Name of Corporation as currently	filed with the Florida De	ept. of State)		
(Document Number of C	Sorporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fi its Articles of Incorporation:	•	adopts the follow	ing amendment(s) to	
A. If amending name, enter the new name of the corporation:				
Peliable Towing and name must be distinguishable and contain the word "corporation." "Corp.," "Inc.," or Co., " or the designation "Corp." "Inc.," or "Coword "chartered," "professional association," or the abbreviation "P	" "company," or ⁴ incor o", A professional corpo	porated" or the	abbreviation	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		· · · · · · · · · · · · · · · · · · ·		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	21100 Su Currer Bo	57 ave 4. FL 3	# XV6 3189	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Florida, enter the n	ame of the		
Name of New Registered Agent			_	
(Florida stree	rt 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 wi Signature of New Reg	ith and accept the obligati gistered Agent, if changin	ELAHACEL 3	Tananaga Tan	

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> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	te Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change	<u> </u>	Orland Papian	1510 NW 19 are + 6305
Add			miami , fr 331)5
Remove			
2) Change	_D_	Joige Gonzalez	21435 Falcon Highway Peyton, CO 80831
Remove			10. 40. 70. 70. 70. 70. 70. 70. 70. 70. 70. 7
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional s	ding additional Ai heets, if necessary)	. (Be specific	,			
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fan amendment	orovides for an ex	change, reclass	ification, or car	ncellation of issu	ed shares.	
provisions for im	plementing the an able, indicate N/A)	nendment if not	contained in th	ne amendment it	tself:	
(іј поі аррисс	nie, indicate S/A)					
						· · · · · · · · · · · · · · · · · · ·
					· · · · · ·	

The date of each amendment(s) adoption:	(0)4/3017		, if other than the
date this document was signed.	(0),10,00	7	
Effective date if applicable:	$\underline{\hspace{1cm}}$	<u> </u>	
(no	more than 90 days after amen	dment file date)	
Note: If the date inserted in this block does not me document's effective date on the Department of State		ng requirements, this date will	not be listed as the
Adoption of Amendment(s) (CHECK	(ONE)		
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro		cast for the amendment(s)	
☐ The amendment(s) was/were approved by the shar must be separately provided for each voting grou			
"The number of votes cast for the amendment	nt(s) was/were sufficient for ap	proval	
by(voting g		·	
(voting g	group)		
☐ The amendment(s) was/were adopted by the board action was not required.	d of directors without sharehold	der action and shareholder	
The amendment(s) was/were adopted by the incoraction was not required.	porators without shareholder a	ction and shareholder	
Dated			
Signature	Julial or other officer – if directors o	or officure have not have	
	ator – if in the hands of a received		
appointed fiduciary by the			
1 17 1	hetto milian		
(Type	ed or printed name of person si	gning)	
	President		
	(Title of person signing)		