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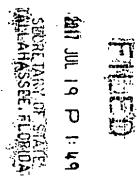
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JUL 2 4 2017.



COVER LETTER

Division of Corporations NAME OF CORPORATION: NAUGRRO CARRIER SERVICES INC DOCUMENT NUMBER: P170000 23835 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Heidy Rodrigue Z

Name of Contact Person

Union Caerier Services

Firm/Company carrierservices 2 Grail. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Heidy Rodnigue 3 at 305 3921035

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

TO: Amendment Section

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

Navarro Carrier	- Services Inc
(Name of Corporation as current)	v filed with the Florida Dept. of State)
P1700002383	5
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	They hew
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "word "chartered," "professional association," or the abbreviation "B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Co". A professional corporation running the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	401 Blu 69 St ApT401 Miani Beach, Fl 33141
D. If amending the registered agent and/or registered office address Name of New Registered Agent 40 B u (Florida str.) New Registered Office Address: Manie Beach	Diaz Diaz 09 St Apt 401 reel address)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar Signature of New I	: with and accept the obligations of the position. Registered 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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One). 1) Change Add Remove	Title	Name Alexander Navarro	3393 NW 151 terre Miani bardens, Fl 33054
2) Change Add Remove	P	Juan, H Diaz Diaz	401 Blu 695t ApT 40 Liani Beach FL 33141
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

amending or adding additional Art ttach additional sheets, if necessary).	(Be specific)			
				
				
				
	· -			
<u> </u>				
f an amendment provides for an exc	hange, reclassification,	or cancellation of is	sued shares,	
provisions for implementing the amo	endment if not containe	d in the amendmen	t itself:	
(if not applicable, indicate N/A)				
				
			<u> </u>	
			-	

The date of each amendment(s) adoption: _	<u> </u>	12	2017		if other than the
date this document was signed.	- 1.5	,			
Effective date <u>if applicable</u> :	-1/12	1 24) 	ent file date)	
	(no more)	than 90	days after amendm	ent file date)	
Note: If the date inserted in this block does document's effective date on the Department			ole statutory filing	requirements, this date wil	I not be listed as the
Adoption of Amendment(s) (<u>C</u>	CHECK ONE)			
The amendment(s) was/were adopted by the shareholders was/were sufficient for	he shareholder: or approval.	s. The r	umber of votes cas	t for the amendment(s)	
☐ The amendment(s) was/were approved by must be separately provided for each voti	the shareholde ing group entit	ers throu led to vo	gh voting groups. He separately on th	The following statement e amendment(s):	
"The number of votes east for the an	nendment(s) w	as/were	sufficient for appre	val	
by				<u></u> ,••	
6	voting group)				
☐ The amendment(s) was/were adopted by the action was not required.	he board of dir	ectors w	rithout shareholder	action and shareholder	
☐ The amendment(s) was/were adopted by the action was not required.	he incorporato	rs witho	ut shareholder actic	on and shareholder	
Dated 7 12 Signature X Oly	2017				
Signature X Oly	su-	-			
(By a director, pr	resident or othe			fficers have not been	
selected, by an it appointed fiduci			hands of a receiver	, trustee, or other court	
Ale	exand	len	Navo	IRRO	_
,	(Typed or p	rinted na	ime of person signi	ng)	
	The.	Siz	ame of person signi		
			'nercon cionino)		