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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: DAYSPRING CA	RGO/ LOGISTICS SVCS.	INC.
DOCUMENT NUME			
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	PAULETTE E BLAIR-ALE	XANDER	
		Name of Contact Person	1
		Firm/ Company	
	2768 SW EDGARCE STRE	ET	
		Address	
	PORT ST LUCIE, FL 34953		
	-	City/ State and Zip Cod	e
keest	iroseta aol.com		
	E-mail address: (to be us	sed for future annual report	notification)
	n concerning this matter, pleas		
PAULETTE E BLAII		at (621-9858
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depo	irtment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, F1, 32314	Amend Divisio Clifton 260 l f	Address Iment Section on of Corporations Building Secutive Center Circle Issee, F1, 32301

Articles of Amendment to ion

	Art	icles of Incorporation
DAYSPRING CARGO	LOGISTICS SVCS,INC.	***
	(Name of Corporation	as currently filed w
P17000040623		

(Name of Corporation as curre	ntly filed with the Florida Dept. of State)
P17000040623	
(Document Numbe	r of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." of word "chartered," "professional association," or the abbreviatio	r "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Re 🗻
	A
	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	· 3r
	<u> </u>
D. If amending the registered agent and/or registered office at new registered agent and/or the new registered of fice addr	
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age Thereby accept the appointment as registered agent. Tam jamilia	
	

Signature of New 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> </u>	John Doe	
\underline{X} Remove	<u>V</u>	Mike Jones	
X Add	<u>8V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	PAULETTE BLAIR-ALEXANDER	2768 SW EDGARCE STREET
Add	•		PORT ST LUCIE, FL 34953
Remove			
2) Change	VP	SHARON BAKER	2426 SW BAYSHORE BEVD
Add			PORT ST LUCIE, FL 34953
X Remove	SEC	PAULETTE BLAIR-ALEXANDER	2768 SW EDGARCE STREET
3.) Change Add			PORT ST. LUCIE, FL 34953
Remove			
4) Change	MGR	SHARON BAKER	2426 SW BAYSHORE BLVD
Add			PORT ST LUCIE, FL 34953
X Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if accessary — the specific) If an amendment provides for an exchange, reclassification, or cancellation of issued shares, proxisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N.4)	If amending or adding additional	
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(if not applicable, indicate N A)	provisions for implementing the	amendment if not contained in the amendment itself:
	- (if not applicable, indicate N	A)
	•	
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The date of each amendment(s) a date this document was signed.	loption:	iJ`	other 1	han the
Effective date <u>if applicable</u> :				
	(no more than 90 days after amendment file date)			
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date with partment of State's records.	ll not b	e listec	l as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) of flicient for approval.			
	proved by the shareholders through voting groups. The following statement 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			
pi				
	opted by the board of directors without shareholder action and shareholder	SECO FALL/	17 A	
action was not required.			AUG :	1
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	<u>n:</u>	24 PM	f
08/23/201	7		_<	·
Dated Signature			1:54	
(By a d selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)			
	PAULETTE E BLAIR-ALENANDER			
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)			