

P17000057142

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

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08/25/20--01001--010 **35.00

RECEIVED
2020 AUG 24 PM 4:41:00
-2 1114:33

C. GOLDEN

SEP - 3 2020

Quik Courier

Requester's Name

400 Capital Circle SE 18267

Address

Tallahassee, Fl. 32301

City/State/Zip

Phone

850-284-4584

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

Insoftel Logistic Inc.

(Corporation Name)

D17000057142

(Document #)

(Corporation Name)

(Document #)

(Corporation Name)

(Document #)

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(Document #)

(Corporation Name)

(Document #)

☐ Walk in

☐ Pick up time _____

☐ Certified copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

SEP-2 PM 4:30

Amendment

QWIK COURIER
400 CAPITAL CIRCLE SE
SUITE 18267
TALLAHASSEE, FLORIDA 32301
850-284-4584

WE ARE KINDLY REQUESTING THE FOLLOWING:

PLEASE PUT IN OUR BOX WHEN COMPLETED

PLEASE DO NOT MAIL

Amendment Insoftel Logistic Inc.

THANK YOU SO VERY MUCH!!!!!!

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: INSOFTEL LOGISTIC INC.

DOCUMENT NUMBER: P17000057142

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

FABIO GIALLANZA

Name of Contact Person

SALCEDO ATTORNEYS AT LAW P.A.

Firm/ Company

200 S BISCAYNE BLVD. SUITE 2700

Address

MIAMI, FL 33131

City/ State and Zip Code

PREYNAFARJE@LAWJSH.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FABIO GIALLANZA

Name of Contact Person

at (305) 375-0640

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 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 Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 31, 2020

QWIK COURIER
400 CAPITAL CIRCLE SE #18267
TALLAHASSEE, FL 32301

SUBJECT: INSOFTEL LOGISTIC, INC
Ref. Number: P17000057142

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 020A00016689



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 25, 2020

QWIK COURIER
400 CAPITAL CIRCLE SE #18267
TALLAHASSEE, FL 32301

SUBJECT: INSOFTEL LOGISTIC, INC
Ref. Number: P17000057142

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 420A00016288

Articles of Amendment
to
Articles of Incorporation
of
INSOFTEL LOGISTIC, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P17000057142

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

TRAXION LOGISTICS USA, Inc.

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

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**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent JSH REGISTER AGENT SERVICES INC

200 S BISCAYNE BLVD. SUITE 2700

(Florida street address)

New Registered Office Address: MIAMI, Florida 33131
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>PD</u>	<u>Felipe de Jesus Bada Sainz</u>	<u>Paseo de la Reforma 115, Floor 17</u> <u>Lomas de Chapultepec</u> <u>Mexico City, Mexico 11000</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>CBO</u>	<u>Cristian Burbano</u>	<u>7665 NW 182nd Ter</u> <u>Hialeah, FL 33015</u> <u>Paseo de la Reforma 115, Floor 17</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Ana Gabriela Gomez Magana</u>	<u>Lomas de Chapultepec</u> <u>Mexico City, Mexico 11000</u> <u>Paseo de la Reforma 115, Floor 17</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>SD</u>	<u>Adolfo Salame Mussali</u>	<u>Mexico City, Mexico 11000</u> <u>Paseo de la Reforma 115, Floor 17</u> <u>Lomas de Chapultepec</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>O</u>	<u>Roberto Priego de Basacaran</u>	<u>Mexico City, Mexico 11000</u> <u>Paseo de la Reforma 115, Floor 17</u> <u>Lomas de Chapultepec</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>O</u>	<u>Monica Cardenas</u>	<u>7665 NW 182nd Ter</u> <u>Hialeah, FL 33015</u> <u>Paseo de la Reforma 115, Floor 17</u>
7) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>O</u>	<u>Carlos Arturo Oropeza Cardenas</u>	<u>8400 NW 36TH ST</u> <u>Suite 450</u> <u>Doral, FL 33166</u>

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

Carlos Arturo Oropeza Cardenas and/or Christian Burbano acting as Directors or Officers of the Corporation, in no case and under no circumstance shall be entitled to do any of the following until and unless such obligation, action or contract is approved by the Chairman of the Board:

- a) obtain financing or create any kind of liens or other guarantees of any type on behalf of the Corporation;
- b) acquire or sell any business entity or division;
- c) open or close bank accounts in any currency, administer, maintain and/or manage them;
- d) compromise or release any claim or right of the Corporation involving an amount in excess of US\$500,000.00; or
- e) enter into, execute and deliver agreements and supplemental documents to carry out their duties outside the ordinary course of business, or in excess of US\$500,000.00 in the ordinary course of business

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

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 will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☒ 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 cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

Dated August 27, 2020

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)

ADOLFO SALAME MUSSALI

(Typed or printed name of person signing)

Director / Secretary

(Title of person signing)