## P17000057582

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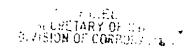
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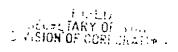
## COVER LETTER



TO: Amendment Section Division of Corporations 2818 JUL 83 AM 11: 88

NAME OF CORPORATION: ROADRUNNERS	S USA PORT ST. LUCIE CORP.
DOCUMENT NUMBER: P17000057582	
The enclosed Articles of Amendment and fee are su	ibmitted for filing.
Please return all correspondence concerning this mat	atter to the following:
ROSA MARIA MORALES	
<del></del>	Name of Contact Person
ROADRUNNERS USA POF	
	Firm! Company
12291 SW 10 TERR	Tithe Company
<del></del> -	Address
MIAMI Ft. 33184	
	City/ State and Zip Code
PSLROADRUNNERSUSA@GM/	AIL.COM
E-mail address: (to be us	sed for future annual report notification)
For further information concerning this matter, pleas ROSA MARIA MORALES	786 412-8884
Name of Contact Person	at () Area Code & Davtime Telephone Number
Enclosed is a check for the following amount made p	, ,
■ \$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6527 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Fallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



ROADRUNNERS USA PORT ST. LUCIE CORP.

2818 JUL 23 AM 11: 98

(Name o	f Corporation as current	ly filed with the Florida	Dept. of State)
P17000057582			
	(Document Number c	f Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporati	on adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered." "professional associa	ation "Corp." "Inc," or "	"Co" - A professional co	corporated" or the abbreviation
B. Enter new principal office address,		12291 SW 10 TERR	
(Principal office address <u>MUST BE A S</u>		MIAMI FL 33484	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		12291 SW 10 TERR	
		MIAMI FL 33184	
D. If amending the registered agent an new registered agent and/or the new			name of the
	ROSA MARIA MORALES		
Name of New Registered Agent			
	(Florida st	reet addressi	<del></del>
New Registered Office Address:	12291 SW 10 TERR, MIAMI		, Florida
ness negistered typee than ext.	(City)		(Zip Code)
New Registered Agent's Signature, if of Thereby accept the appointment as regista	nanging Registered Agent ered agent. I am familiar	: with and accept the oblig	ations of the position.
R	Signature of New I	Registered Agent, if chans	ring

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 os an Add.

Example: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PT	RAUDEL MORALES	1071 NE MARTIN AVE
Add			JENSEN BEACH, FL 34957
X Remove			
2) Change	РТ	ROSA MARIA MORALES	12291 SW 10 TERR
X Add			MIAMI FL 33184
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Kemove			
6) Change			
Add			
Remove			

lf amending or adding additional Arti Attach <i>additional sheets, if necessaryt</i>	(Be specific)				
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f an amendment provides for an exch	ange, reclassifica	tion, or cance	llation of issue	ed shares.	
provisions for implementing the ame	ndment if not con	tained in the	amendment it:	self:	
(if not applicable, indicate N A)					
		<u> </u>			<del>.</del>
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		. <del>.</del> .			<u> </u>
				_	<del> </del>

	JULY 19, 2018	, if other than the
The date of each amendment(s) ado date this document was signed.	ption:	, if other man the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep.	ock does not meet the applicable statutory filing requirements, this date artment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) licient for approval.	
☐ The amendment(s) was/were appromust be separately provided for e	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	1
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder	
JULY 19, 20 Dated	18	
selected.	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)  ROSA WARIA MORAJES.  (Typed or printed name of person signing)	
_	Pecoclina	
	(Title of person signing)	