P700058328

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2018 OCT 26 PM 2:5 SECRETARY OF STATI

COVER LETTER

TO: Amendment Section Division of Corporations

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Tallahassee, Fl. 32314

NAME OF CORPORATION: NCT LOGISTICS INC
DOCUMENT NUMBER: P17000058328
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ANTHON OWN OH Name of Contact Person
HCT LGGISTICS IN C
Firm/Company 11(v) SW 2ND SI- ADT 203 Address
16M13ROICE PINES FL 33025 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
AVIH (A) 0600 H at (714) 281 432-0 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:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certificate of Status \$43.75 Filing Fee Certified Copy (Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

NCT LOGISTICS INC	2018 OCT 26 PM 2: 50
(Name of Corporation as curren	tly filed with the Florida Dept. of State) F STATE
P17000058328	TALLAHASSEE, FL
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "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>)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	1918 SW 177 AUE MIRAMOR FZ 33029
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	t:
I hereby accept the appointment as registered agent. I am familiar	
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:	ove, ana sa	uy Smun, Sv. as an Aua.	
X Change	\underline{PT}	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	_V_	MARC TALLOR	176 guine/ st.
Add			apt 3
Remove			prooke/ n/ 112/6
2) Change			
Add			
Remove			
3) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			·
Add			
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	(Be specific)			
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	<u> </u>	·		
				
an amendment provides for an exch	ange, reclassifica	<u>ition, or cancellati</u>	on of issued shares	خ
	adment if not cor	itained in the ame	<u>ndment itself:</u>	
provisions for implementing the ame				
orovisions for implementing the ame (if not applicable, indicate N/A)				
provisions for implementing the ame				
provisions for implementing the ame				
provisions for implementing the ame			. <u> </u>	
provisions for implementing the ame				
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provisions for implementing the ame				
provisions for implementing the ame				

The date of each amendment(s) a date this document was signed.	doption: 10/2 3/ 2018	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file da	ite)
Note: If the date inserted in this bedocument's effective date on the Do	block does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
the amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the autificient for approval.	mendment(s)
	proved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendm	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and	I shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	reholder
Dated 10/2	3/20/8	
Signature	· ·	
` •	irector, president or other officer – if directors or officers hav	
	 d, by an incorporator – if in the hands of a receiver, trustee, of ted fiduciary by that fiduciary) 	r omer court
	ANIHONY GNDOH	
	(Typed or printed name of person signing)	
	(Title of person signing)	571
	(Title of person signing)	