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TO: Amendment Section Division of Corporations

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NAME OF CORP	ORATION: Aldo Cargo Expres	ss Corp	
	MBER: P17000076060		
	les of Amendment and fee are su	bmitted for filing.	
Please return all co	rrespondence concerning this ma	tter to the following:	
	Claudia E Reyes		
		Name of Contact Persor	1
	CBS Financial CPA		
		Firm/ Company	
	6075 W Commercial Blvd		
		Address	
	Tamarac, FL 33319		
		City/ State and Zip Code	e
cla	udia@cbsfinancialcpa.com		
	-	sed for future annual report	notification)
	·	•	,
For further informa	tion concerning this matter, plea	se call:	
Claudia		954	724-4141
Nar	ne of Contact Person	Area Co	_) 724-4141 de & Daytime Telephone Number
Enclosed is a checl	s for the following amount made	payable to the Florida Depa	artment 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 Fallahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

17 NOV -6 AM 10: 10

	01	IN MOA - D WILLIAM
Aldo Cargo Express, Corp		SECRETARY OF STATE
(Name of Corporation	on as currently filed with the Flo	orida Dept Ar State) SSET TLORIDA
P17000076060		
(Docum	nent Number of Corporation (if kn	own)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corp	poration adopts the following amendment(s) t
A. If amending name, enter the new name of the co	erporation:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	." "Inc." or "Co". A profession	
B. Enter new principal office address, if applicable	N/A	
(Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	(X)	
,		
D. If amending the registered agent and/or register new registered agent and/or the new registered		ter the name of the
Name of New Registered Agent		
reme of them hegistered rigers		
	(Florida street address)	
New Registered Office Address:		. Florida
New Registered Office Nauress.	(City)	(Lip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		abligations of the position
т петеоу иссері іне арронитені аз гедімегей адеті.	т ат јатинаг wun ини иссері ine	obligations of the position.
Sign	ature 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	PT John I	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
<u>X</u> Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	2	Aldo Zambrano	401 NW 127TH AVE
🗶 Add			7'
Remove			Plantation, FL 33325
2) Change	_ ✓ _	Sandy Zambyano	401 NW 127TH Ave
_× Add			7
Remove			<u>Planfation</u> , FL 33325
3) Change	<u> </u>	William Rendon	7325 W 18th Ave
<u></u> ⊀ Add			Hialeah, FL 33014
Remove			
4) Change	<u>D</u>	wilson Saguedra	401 NW 127th Ave
😾 Add			7
Remove			Plantation, FL 33325
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	_		
			.	
	1	·		<u> </u>
		"-		
				-
			-	
		_		
		·		<u>.</u> .
f an amendment provides for an excl	range, reclassifica	tion, or cancellatio	n of issued shares	s.
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not con	tained in the amen	dment itself:	<u> </u>
(y not applicable, maicule (ma)				
<u> </u>				
· · · · · · · · · · · · · · · · · · ·				

		r 30, 2017	
The date of each amendment date this document was signed.			, if other than th
	October 30, 2017		
Effective date <u>if applicable</u> :	(no	o more than 90 days after amendment file date)	
Note: If the date inserted in t		eet the applicable statutory filing requirements, this date we's records.	vill not be listed as th
Adoption of Amendment(s)	(<u>CHECK</u>	(ONE)	
The amendment(s) was/were by the shareholders was/we		eholders. The number of votes cast for the amendment(s) oval.	
		reholders through voting groups. The following statement up entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amendmen	ent(s) was/were sufficient for approval	
by		group)	
	· (voting g	group)	•
☐ The amendment(s) was/wer action was not required.	e adopted by the board	d of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	e adopted by the incor	rporators without shareholder action and shareholder	
Octob Dated Signature 🔀	er 30, 2017	Manhour .	
Signature A	v a director, president	or other officer if directors or officers have not been	
		rator - if in the hands of a receiver, trustee, or other court	
	pointed fiduciary by tl		
	Aldo Zambrano	HDO ZAMBRANO.	
	(Туре	ed of printed name of person signing)	
	President		
	 	(Title of person signing)	