P17000081101

Office Use Only



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10/30/17--01015--017 **35.00

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations	
NAME OF CORPORATION: STY	Logiatics Corp
DOCUMENT NUMBER: P17000	081101
The enclosed Articles of Amendment and fee a	are submitted for tiling.
Please return all correspondence concerning thi	is matter to the following:
	Eric V. Santago Name of Contact Person
	Name of Contact Person
	SIY Logistics
	Firm/ Company
29	137 sw 25th Telecoe
. •	Address
<u>u</u>	City/ State and Zip Code
	City/ State and Zip Code
FRIC	.YAMIR @ ME.COM
	be used for future annual report notification)
	·
For further information concerning this matter,	please call:
Eric Y. Santoyo	₃₁ 786 , 308 545°
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount m	hade payable to the Florida Department of State;
•	, , , , , , , , , , , , , , , , , , , ,
\$35 Filing Fee	two Sections of the section of the s
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

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

P17000081101

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address of each Office (Attach additional shee Please note the officer! P = President; V= Vic Executive Officer; CFO held, President, Treasu Changes should be not a change, Mike Jones I Mike Jones, V as Remo	er and/or I ets. if neces director til ese Presiden O = Chief arer, Direct ed in the fa leaves the (tle by the first letter of the office title; 11; T= Treasurer; S= Secretary; D= Director; TR= Financial Officer. If an officer/director holds mo	= Trustee: C = Chairman or Clerk: CEQ = Chief re than one title, list the first letter of each office the PST and Mike Jones is listed as the V, There is
Example: X_Change	<u>PT</u>	J <u>ohn Do</u> e	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Marian Rodrigues	2937 Sw 25th Terrace
Change	5	Susana Cepero	Higmi FL 33133 11861 SW 182nd Ter Higmi FL 33177
Add Remove 4) Change			
Add Remove 5) Change Add			
Remove			

6) _____ Change

____ Add

____ Remove

f amending or adding addition Much <i>additional sheets, if nece</i> :	ssary). (Be spec	rific)	<u>L</u> .		
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an amendment provides for provisions for implementing t	<u>an exchange, rec</u> be amendment if	<u>lassification, or</u>	<u>cancellation of i</u> in the amendmer	ssued shares, it itself:	
(if not applicable, indicate		W. Committee			
			,		
					
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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 tiling requirements, this date will not be listed 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 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
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by
(voting group)
·
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Dated 1018 2017
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorpolator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
Paident