P17000086859

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPOR	ration: <u>3P Trad</u> ber: <u>P170000</u> 5	sports Log	stics, Inc.
DOCUMENT NUMI	ber: <u>1⁹ 70000</u>	36859	,
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
		Name of Contact Person	1
		Firm/ Company	
		Address	
		City/ State and Zip Code	
	E-mail address: (to be us	ed for future annual report	notification)
For further informatio	n concerning this matter, pleas	e call:	
Percy	Sayles	at (407	de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	ertment 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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327	Amend Divisio	Address iment Section on of Corporations Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

3P Transport 2 Log	115+165 -	Inc.		
(Name of Corporatio	n as currently fi	<u> In に '</u> led with the Florida D	ept. of State)	
P 17 000086859				
	ent Number of Co	orporation (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Flo	rida Profit Corporation	n adopts the follow	wing amendment(s)
A. If amending name, enter the new name of the con	rporation:			
				The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the a	" "Inc," or "Co	". A professional corp	orporated" or the poration name mi	abbreviation
B. Enter new principal office address, if applicable:				
(Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u>)			
	•			
C. Enter new mailing address, if applicable:	17)			
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	y .			
				
	,			
D. If amending the registered agent and/or registere	ed office address	in Florida, enter the	name of the	
new registered agent and/or the new registered of		THE PROPERTY OF THE	name or the	
Name of New Registered Agent				
	(Florida street	address)		
New Registered Office Address:			, Florida	
New Registered Office Address.	(Ci	ָ תָּיֻ		Zip Code)
New Registered Agent's Signature, if changing Regi I hereby accept the appointment as registered agent. I		and accept the obligat	tions of the positio) n .
				~*
	. (1)			<u> </u>
Signa	uure oj New Regi	istered Agent, if changing	ng	*, *

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)

Example:

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.

X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	<u> </u>	Cromwell Harris	
Add			
Remove			
2) Change	<u> </u>	Troid Hair	1031 Sunshine Ln
Add			Vn. + 104 Altamonte
Remove			Springs, FL 32714
3) Change			-
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			-
Remove			
6) Change			
Add			
Remove			

Attach additional	Iding additional Articles, enter change(s) here: sheets, if necessary). (Be specific)	
Attach aaannonar	sneets, if necessary). (De specific)	
		-
	provides for an exchange, reclassification, or cancellation of issued	
	nplementing the amendment if not contained in the amendment itse able, indicate N/A)	: <u>:11:</u>
(\$,	
		<u> </u>
		·

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: \(- \frac{5}{9} - \frac{9018}{00 more than 90 days after amendment file date}\)	
(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 widocument's effective date on the Department of State's records.	Il not be listed as the
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" (voting group)	
(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.	
Signature Signature Signa	
(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)	_
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	