P17000101662

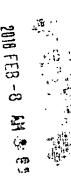
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: AIDEN LOGISTIC	C AND TRANSPORT, INC	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBI	P17000101662		·
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
Ĭ	BEN Z BENGELLOUN		
_	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	1
A	AIDEN LOGISTIC AND TR	ANSPORT, INC.	
		Firm/ Company	
2	930 S. 50TH ST.		
_	· .	Address	
1	TAMPA, FL 33619		
-		City/ State and Zip Code	<u> </u>
bencan	ital007@gmail.com		
		sed for future annual report	notification)
For further information BEN Z BENGELLOU	concerning this matter, pleas		950 1919 ·
Name of Contact Person		at (813	de & Daytime Telephone Number
Name of	Contact Person	Arca Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	☐S43.75 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 Tallahassec, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



AIDEN LOGISTIC AND TRANSPORT, INC.

(Name of Corporation as curr	ently filed with the Florida Dept. o	of State)
P17000101662		of State)
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, tax Articles of Incorporation:	this Florida Profit Corporation adop	pts the following amendment(s) to
4. If amending name, enter the new name of the corporation	<u> </u>	
		The new
name must he distinguishable and contain the word "corpor "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association," or the abbreviati	or "Co". A professional corporation	ited" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office and/or the new registered office add		of the
Name of New Registered Agent		
(Florid	la street address)	
New Registered Office Address:	(Citv)	Florida(Zip Code)
	(Ciţy)	(Lip Coue)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am famil		of the position
an in a man and a man and a man a	iai iiin ana accept the obligations c	g me posmon.

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: X 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	YOUNESS LAABID	2842 SOMERSET PARK DR
X Add			TAMPA, FL 33613
Remove			
2) Change			
Add			
Remove			
3)Change	~		
Add			
Remove			
4) Change			·
Add			
Remove			
5) Change		_	_
Add			
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	(Be specific)	<u>ere</u> :		
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	range reclassification	or cancellation of is	sued shares, itself:	
an amendment provides for an exchaprovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not containe	d in the amendment		
provisions for implementing the ame	ndment if not containe	d in the amendment		
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provisions for implementing the ame	endment if not containe	d in the amendment		
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	endment if not containe	d in the amendment		

The date of each amendment(s date this document was signed.	s) adoption:	, if other than the
	02/06/2018	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this construction because the properties of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendmen e sufficient for approval.	t(s)
	approved by the shareholders through voting groups. The following states for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	der
■ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
02/06/2 Dated	018	
Signature	and	
sele	a director, president of other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other consisted fiduciary by that fiduciary)	
	BEN Z BENGELLOUN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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