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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: BLACK GOLD E	OGISTIC INC				
DOCUMENT NUME	BER: P18000007168					
	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	IOCHY GONZALEZ					
		Name of Contact Persor	1			
	BLACK GOLD LOGISTIC INC					
	Firm/ Company					
	18361 SW 135TH AVE					
	Address					
	MIAMI FL 33177					
		City/ State and Zip Code				
	IOCHYFANY@YAHOO.ES	;				
	-	sed for future annual report	notification)			
For further information	n concerning this matter, pleas	786	239-6666			
Name o	of Contact Person	at (Area Co	_)			
Enclosed is a check fo	r the following amount made					
■ \$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 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

BLACK GOLD LOGISTIC INC

(Name	of Corporation as current	ly filed with the Flor	ida Dept. of State)		
P18000007168					
	(Document Number of	of Corporation (if kno	wn)		
Pursuant to the provisions of section 607 ts Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corpo	ration adopts the follow	ing amen	dment(s)
A. If amending name, enter the new n	ame of the corporation:				
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co"	A professional corpo	oorated" or the abbrevia ration name must cont	The tion "Cor ain the v	p_{ij}
3. Enter new principal office address,	if annlicable:	N/A			
Principal office address MUST BE A S					
					_
					_
Enter new mailing address, if appl		N/A			
(Mailing address MAY BE A POST	<u>OFFICE BOX</u>)				
			<u>.</u>		
). If amending the registered agent ar	nd/ar registered affice add	ress in Florida, ente	r the name of the	_	
new registered agent and/or the ne			The mine of the		
Name of New Registered Agent	N/A				
	(Florida sti	reet address)		_ 2 3 :	
New Registered Office Address:	N/A		, Florida	K	-
		(City)	,	o Code)	
				<u>;;3%</u>	· .
<u>few Registered Agent's Signature,</u> if c	hanging Registered Agent	•		4H S: 14	:•
hereby accept the appointment as regist	tered agent. I am familiar	± with and accept the o	bligations of the position		•
					-

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Do	<u>oe</u>	
X Remove	Y	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
I) Change	VP	_	MILENY CANTILLO	18361 SW 135TH AVE
Add				MIAMI, FL 33177
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add		_	· · · · · · · · · · · · · · · · · · ·	
Remove				
6) Change		_		· · · ·
Add				
Remove				

E. If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)
N/A	
	4-1
F. If an amendment provides for an exclusions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
	

The date of each amendment(s date this document was signed.) adoption:	, it other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholde	er action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amend sufficient for approval.	ment(s)
	approved by the shareholders through voting groups. The following store each voting group entitled to vote separately on the amendment(s)	
"The number of votes e	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
	a director president or other officer – if directors or officers have not	
	cted, by an incorporator – if in the hands of a receiver, trustee, or othe pinted fiduciary by that fiduciary)	r court
	IOCHY GONZALEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	