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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ation: <u>Unifed</u> er: <u>P180000</u> 5	Interstate Lu	ogistics Inc
DOCUMENT NUMBI	er: <u>P180000</u>	29.867	
The enclosed Articles of	f Amendment and fee are si	ibmitted for filing.	
Please return all corresp	ondence concerning this ma	ntter to the following:	
_	Flisa	beth Olivera Nume of Contact Perso	
	12.00	Nume of Contact Perso	n ich co <del>r</del>
_		Linterstate Log	istics Inc
	13448 SW	Tnterstate Log Firm/Company  62nd St Un  Address	it Duo
_		Address	
_	Hi	ami FL 3318. City/ State and Zip Cod	3
		City/ State and Zip Cod	e
	Olivera	reaHu1@9mai	L.com
_	E-mail address: (to be u	sed for fature annual report	notification)
For further information of	concerning this matter, plea	se call:	
Elisabi	th Olivera	at (_ <del></del>	de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	urtment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ameno Divisio P.O. B	g Address Iment Section on of Corporations ox 6327 assec, FL 32314	Amend Divisio The Ce	Address ment Section n of Corporations entre of Tallahassee
1 4114113	10000, FL 04014	2410 P	Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation	erstate Logistics :	lorida Dept. of State)
Pison	0029867	
(Docum	nent Number of Corporation (if k	nown)
Pursuant to the provisions of section 607,1006, Florida es Articles of Incorporation:	Statutes, this Florida Profit Cor	rporation adopts the following amendment(s)
A. If amending name, enter the new name of the co	orporation:	
		77
ame must he distinguishable and contain the word "co Inc.," or Co.," or the designation "Corp," "Inc." chartered," "professional association," or the abbrev	or "Co". A professional cor	The new corporated" or the abbreviation "Corp.," rporation name must contain the word
3. Enter new principal office address, if applicables		
Principal office address <u>MUST BE A STREET ADD</u>	ORESS )	83
	<del></del>	020
		S
Enter new mailing address, if applicable:		P 2
(Mailing address MAY BE A POST OFFICE BO)	<u>X</u> )	<u> </u>
		35 S O
		5
. If amending the registered agent and/or register new registered agent and/or the new registered of		<u>iter the name of the</u>
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Regi hereby accept the appointment as registered agent. I	istered Agent: Lam familiar with and accept the	abligations of the position
, and any and any and any any and any any any	jamma and und uccept me	sorizations by the position,
·		
r	ture of New Registered Agent, if	·

Check if applicable

 $\Box$  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)

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	Doe	
X Remove	<u>V</u> <u>Mike</u>	2 Jones	
X Add	<u>SV</u> <u>Sally</u>	· Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address 28 T
1) Change Add	<u>CEO</u>	Corona Horales, Ana de la Concepción	Unit DIO Miami FL 33183
<ul><li>✓ Remove</li><li>2) Change</li><li>✓ Add</li></ul>	<u>CEO</u>	Elisabeth Olivera	13448 SW Gradact Unit DILO Miami FL 33183
3 ) Remove Add	VP	Ehisabeth Olivera	13448SW Gand St Unit BILD Hiami FL 33183
✓ Remove 4) Change Add			
Remove 5) Change Add		<del></del>	
Remove 5) Change Add			
Remove			

Attach additional sheets, if necessary). (Be specific)	:				
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in amendment provides for an exchange, reclassification, or c	ancellation of	icenad charac	n:⊒	ġ.	(
rovisions for implementing the amendment if not contained in	the amendme	nt itself:		9	
(if not applicable, indicate N/A)				٥.	
	<u> </u>	-			
				-	
				_	

The date of each amendment(s) adoption: 09/09/2020 date this document was signed.	_, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will redocument's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and slaction was not required.	hareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	20
☐ 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):	7020 SEP 28 PH
"The number of votes cast for the amendment(s) was/were sufficient for approval	28 F
by	H 6: -
Dated	σ
Signature (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)	
Elisabeth Olivera (Typed or printed name of person signing)	
(Title of person signing)	