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SECRETARY OF STATE

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DEC 0.5 2018 `

COVER LETTER

TO: Amendment Section Division of Corporations							
NAME OF CORPORATION: REDLAND DOCUMENT NUMBER: P180000	LOGISTICS & TR	LANSFORT INC.					
DOCUMENT NUMBER: 1 13	0,000						
The enclosed Articles of Amendment and fee are su	bmitted for filing.						
Please return all correspondence concerning this matter to the following:							
	Norlan D	ELGADO					
	Name of Contact Person						
	_						
	Firm/ Company						
15417 SW S	15417 SW 50th LANE						
15417 SW 50th LANE MIAMI, FZ 33185 City/State and Zip Code WOLLANG DELGADO @C.nail. Com							
	City/ State and Zip Code						
NORLAND ELGADO @ Gnail. Com							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, pleas	e call:						
NORIAN LELGADO	305	,439-2159					
Name of Contact Person		e & Daytime Telephone Number					
Enclosed is a check for the following amount made p	payable to the Florida Depar	rtment of State:					
\$35 Filing Fee \$\Bigcup \$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	Street A						
Amendment Section		nent Section					
Division of Corporations P.O. Box 6327	· ·						
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle							

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

FILED

PEDLAND LOGISTIC	S & TEAL	Isporit	2018/10/29	PM 2: 26
(Name of Corpo			F@rida;Dept. of S	State) STATE
P180000	ration as currently		TALLAHAS	SEE, FL
	ocument Number of C			
Pursuant to the provisions of section 607,1006, Floits Articles of Incorporation:	orida Statutes, this F_{i}	lorida Profit C	orporation adopts	the following amendment(s
A. If amending name, enter the new name of the	e corporation:			
				The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Corp, " "Inc," or "C	o". A profess		
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	(BOX)			
D. If amending the registered agent and/or reg new registered agent and/or the new register		ss in Florida, o	enter the name of	<u>the</u>
Name of New Registered Agent				
	(Florida stree	et address)		
New Registered Office Address:	·		, Flo	rida
	(0	City)		(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		ith and accept i	the obligations of t	he position.
	Signature of New Re	gistered 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) 1) Change Add	Tide V	ROLANDO CLANISO	Address 15417 SW SOH LA MIAMI, FZ 33185
Remove 2) Change Add Remove 3) Change Add			
Remove Change Add Remove			
5) Change Add Remove	-		
Change Add Remove			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 filing requirements, this date wi document'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)	
☐ 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 11/25/18	
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)	
WORLAN DEIGADO	
(Typed or printed name of person signing)	
PEESIDENT	
(Title of person signing)	