P18000043227

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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPOR	ATION: CRINGE ICC	n Standarc) moving & st	erage LLC
DOCUMENT NUMB	$\{\lambda_1, \alpha_2, \alpha_3, \dots, \alpha_n\}$	04327	· · · · · · · · · · · · · · · · · · ·	\sim 1
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	condence concerning this ma	tter to the following:		
-	Zane T	Name of Contact Person	n	-
-	8063 F	Firm/ Company OSe May 16 Address	Circle	
-	Boynton	City/ State and Zip Cod	FL 33472	-
	E-mail address: (to be us	OMERICA S	endand moving.	com
For further information	concerning this matter, pleas	se call:		
Zane	Torrento Contact Person	at (917 Area Co		
Enclosed is a check for	the following amount made [payable to the Florida Depa	uriment of State:	3 85C
□ \$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)	1 -3 -7 6: 34
Amer Divis P.O. I	ng Address adment Section ion of Corporations Box 6327 nassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301	

Articles of Amendment

to Articles of Incorporation

of O		
american Stondard moving & Storage	LLA	
(Name of Corporation as currently filed with the Florida Dept. of State)		
P18000043227		
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amits Articles of Incorporation:	endm en (s) to	
A. If amending name, enter the new name of the corporation: OMONICON Standard Moving Stringe Inc. The name must be distinguishable and contain the word "corporation," "company," or "inforporated" or the abbreward "corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain "Corp.," "professional association," or the abbreviation "P.A."	new viation sin the	
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 address in Florida, enter the name of the new registered agent and/or the new registered office address:		
Name of New Registered Agent		
	્રક €	•
(Florida street address)	罗第	
New Registered Office Address:		, L , ' , , ' , '
(City) (Zip Code)		
Now Designated Aponto Simple at the Control of the	िस 6:	点と
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	2 E	
	3	
Signature of New Registered Agent, if changing		

(Attach additional sheets, Please note the officer/dir P = President; V = Vice Executive Officer; CFO = held. President, Treasure. Changes should be noted	and/or D if necess rector titl President = Chief I r, Directo in the fo ves the c	lirector b sary) le by the fi t; T= Tree Financial or would i llowing m orporatio	eing added: irst letter of the office title: asurer; S= Secretary; D= Director; TR= Ti Officer. If an officer/director holds more t be PTD. tanner. Currently John Doe is listed as the t n, Sally Smith is named the V and S. These s	director being removed and title, name, and rustee; $C = Chairman \ or \ Clerk$; $CEO = Chief$ han one title, list the first letter of each office PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change,
X Change	<u>PT</u>	John Do	∑ €	
X Remove	<u>v</u>	Mike Jo	neş	
<u>X</u> Add	<u>\$V</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		-		
Add				
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).	cles, enter change(s) here: (Be specific)
f an amendment provides for an exch-	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 1/30/18	
(no more than 90 days after amendment file date)	
	İ
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dat document's effective date on the Department of State's records.	e will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	İ
☐ 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):	nt
"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 shareholde action was not required.	r
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 1/130/18	
	ł
Signature 2	
(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 courappointed fiduciary by that fiduciary)	1
(Typed or printed name of person signing)	
Procion or person signing,	
(Title of person signing)	

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