Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000173105 3)))



H180001731053ABC-

		2018 JUN 22 SECRETARY ALL AHASSE
To:	and the second of the second o	35 2
	Division of Corporations	SS N
	Fax Number : (850)617-6380	<u>~</u> ;~ <u>~</u> ;
		무슨 사람들이 모든 그 사람들이 모든 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
From:		AM IO: FLOR
	Account Name : CLARA GIRALDO, P.A.	55 5
	Account Number : I19990000017	<u> </u>
	Phone : (305)485-9300	
	Fax Number : (305)485-1098	p. 1 9
**Ente	the email address for this business entity to be nnual report mailings. Enter only one email addres	used for future

COR AMND/RESTATE/CORRECT OR O/D RESIGN LOGISTICS ENTERTAINMENT & TRANSPORT INC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Amend

JUN 22 2018

I ALBRITTON

RECE: 1 18 JUN 7.2 SECRETARY SECRETARY

Electronic Filing Menu

Corporate Filing Menu

Help

rax Server

PAGE 05



June 21, 2018

FLORIDA DEPARTMENT OF STATE

LOGISTICS ENTERTAINMENT & TRANSPORT INC

15069 SW 9 WAY MIAMI, FL 33194

SUBJECT: LOGISTICS ENTERTAINMENT & TRANSPORT INC

REF: P18000050365

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name and title of the person signing the document must be noted beneath or opposite the signature.

PAGE 3 MISSING

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please calī (850) 245-6050.

Shelia H Young Regulatory Specialist II

FAX Aud. #: 818000173105 Letter Number: 618A00012304 3054851098

CLARA GIRALDO E.A. 4080 SIV 84 AVENUE SUITE C MIAMI, FL 33155

PH.: (305) 485-9300

Articles of Amendment to Articles of Incorporation

Articles of Incorporation
Fotestainment & Transport INC
on as currently filed with the Florida Dept. of State)
0050365
nent Number of Corporation (if known)
a Statutes, this Florida Profit Corporation adopts the following amendment(s)
orporation:
The new
d "corporation." "company." or "incorporated" or the abbreviation ""Inc." or "Co". A professional corporation name must contain the abbreviation "P.A." Professional corporation name must contain the
office address in Florida, enter the name of the
L A. Arias Parra
O. C. I. Outers
9 SW 9 Way

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.

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 = Chiaf 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 Mtke 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 Do	<u>oe</u>	
X Remove	<u>y</u>	Mike Jo	<u>शुस्ट</u>	
X Add	<u>\$Y</u>	Sally St	<u>njth</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
I)Change	PT	-	Mariangelica Arias	15069 SW 9 Way
Add				Homi, FL. 33194
Remove				
2) Change	PT	_	Maria A. Arias Parra	•
X Add				Hiani, Fl. 33194
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

CLARA GIRALDO E.A.

famending or adding additional Arti	cles, enter change(s) here:	4080 S\V 84 AVENUE SUIT MIAMI, FL 33155 PH.: (305) 485-9300
Mach additional sheets, if necessary).	(Be specific)	Fn (303) 403-9300
	<u> </u>	
If an amendment provides for an exc provisions for implementing the am	hange, reclassification, or cancellatiendment if not contained in the amo	on of issued shares. ndment itself:
(if not applicable, indicate N/A)		
···		
<u> </u>		

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date if applicable:	06/08/18	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, th partment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendar fficient for approval.	ent(s)
The amendment(s) was/were approvided for	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	jiemeni
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and share	holder
action was not required.	opted by the incorporators without shareholder action and sharehold	
DatedSignature	08/2018	
(By a c	irector, president or other officer - if directors or officers have not	icen
	d, by an incorporator — if in the hands of a receiver, trustee, or other ted fiduciary by that fiduciary)	court
щроп	Maria A. Arias Paria	
	(Typed or printed name of person signing)	
	President:	
	(Title of person signing)	

.....