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FILING CANCELLED
DUE TO RETURNED CHECK

08/30/13--01007--007 ++35.00

2019 AUS 30 PH 2: 20

GOLDEN SEP 1.1 2019

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#### COVER LETTER

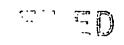
TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: BLUE LINE TRU	CKING USA INC			
DOCUMENT NUMB	151.0000000000000				
	of Amendment and fee are st	ibmitted for filing.			
Please return all corres	pondence concerning this ma	itter to the following:			
	ACNIER J SILVERIO ALV	AREZ			
•	Name of Contact Person				
	BLUE LINE TRUCKING USA INC				
•		Firm/ Company			
	8101 Byron Ave	, ,			
-	· · · · ·	Address			
	MIAMI BEACH FL 33141				
-		City/ State and Zip Cod	e		
enierje	esus@gmail.com				
	E-mail address: (to be u	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
ACNIER J SILVERIO ALVAREZ		at (			
Name o	f Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:		
S35 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)		
Ame Divis P.O.	ing Address Indiment Section Ission of Corporations Box 6327 Ihassee, FL 32314	Ameno Divisio Cliftor	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

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#### Articles of Amendment to Articles of Incorporation



BLUE LINE TRUCKING USA INC		2019 AUG 30 PM 2: 2
(Name of Corpora	ition as currently filed with the Flo	orida Dept. of State)
P18000072849		
(Docu	ument Number of Corporation (if kn	own)
Pursuant to the provisions of section 607,1006, Flori its Articles of Incorporation:	ida Statutes, this <i>Florida Profit Corp</i>	poration adopts the following amendment(s
A. If amending name, enter the new name of the	corporation:	
		The new
name must be distinguishable and contain the we "Corp.," "Inc.," or Co.," or the designation "Corword "chartered," "professional association," or the	rp," "Inc," or "Co". A profession	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	8 <i>0X</i> )	
D. If amending the registered agent and/or regist new registered agent and/or the new registere		er the name of the
Name of New Registered Agent		
	· · · · · · · · · · · · · · · · · · ·	
	(Florida street address)	
New Registered Office Address:		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Ro	egistered 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, an 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 = Chie Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each offic held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doc 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> <u>Jo</u>	<u>hn Doe</u>		
X Remove	<u>V</u> <u>M</u>	Mike Jones		
X Add	<u>SV</u> <u>Sa</u>	ully Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	VP	HURTADO LOPEZ, ELIETY	8101 Byron Ave	
Add			APT 405	
x Remove			MIAMI BEACH, FL 33141	
2) Change	VP	MAYRA R. ALVAREZ GOMEZ	2011 BAY DR	
x Add			APT 13	
Remove		CANCELLED  RETURNED CHECK	MIAMI BEACH FL 33141	
3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

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(Attach additional sheets, if necessary). (Be specific)	
· · · · · · · · · · · · · · · · · · ·	
<u> </u>	
If an amendment provides for an exchange, reclassification, or cancellation of provisions for implementing the amendment if not contained in the amendment (if not applicable, indicate N/A)	f issued shares, ent itself:

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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will r document'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 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 east for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(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	
(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)	-
ACNIER J SILVERIO ALVAREZ	
(Typed or printed name of person signing)	
Carren Signing)	