P18000096068

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SECRETARY OF STATE

DEC 27 2018 C MCNAIR

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: SND CUSTOMS B	ROKERS INC.	
DOCUMENT NUN	P18000096068		
The enclosed Article	s of Amendment and fee are sub	omitted for filing,	
Please return all corr	espondence concerning this mat	ter to the following:	
	ANNA CORRADO		
		Name of Contact Person	<u> </u>
	SND CUSTOMS BROKERS	INC.	
		Firm/ Company	
	2515 NW 72 AVENUE		
		Address	
	MIAMI, FLORIDA 33122		
		City/ State and Zip Code	2
	E-mail address: (to be us	ed for future annual report	notification)
For further informati	on concerning this matter, pleas	e call:	
ANNA CORRADO		at (5911630
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made p	payable to the Florida Depa	artment of State:
□ \$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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SND CUSTOMS BROKERS INC.

(Name o	of Corporation as curren	tly filed with the Florida Dept. of State)	Ch (;)
P18000096068			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	is Florida Profit Corporation adopts the follow	ving amendment(s)
A. If amending name, enter the new na	ame of the corporation:		
N/A			The new
	ation "Corp." "Inc." or	ion," "company," or "incorporated" or the "Co". A professional corporation name mu "P.A."	
B. Enter new principal office address,	if annlicable	N/A	
(Principal office address MUST BE A S			
			
			
C. Enter new mailing address, if appl		N/A	
(Mailing address MAY BE A POST	OFFICE <u>BOX</u>)	<u> </u>	
			
D. If amounting the projectioned agent are	dan maistaned office ad	ldress in Florida, enter the name of the	
new registered agent and/or the ne			
Name of New Registered Agent	N/A		
Traine of the registered light			
	(Florida	street address)	
Non Design (1000 and 111)	N/A	Plusida	
New Registered Office Address:		(City) , Florida (Z	(ip Code)
New Registered Agent's Signature, if o	hanging Registered Age	nt:	
I hereby accept the appointment as regis-	tered agent. I am familia	r with and accept the obligations of the positio	n,
	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 = 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: XChange	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
5) Change			
Add			
Remove			
б) Change			
Add			
Remove			_

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) ARTICLE XII
THE REQUIRED PURPOSE: EMPOWERED TO TRANSACT CUSTOMS BUSINESS AS A BROKER,
SEE 19 CFR 111.11(C)(1)
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) N/A

	DECEMBER 4, 2018	
The date of each amendment(s)		, if other than th
date this document was signed.		
	ECEMBER 4, 2018	
Effective date <u>if applicable</u> :	(no more than 90 days after am	nendment file date)
Note: If the date inserted in this document's effective date on the I		filing requirements, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of vot sufficient for approval.	tes cast for the amendment(s)
	pproved by the shareholders through voting groor each voting group entitled to vote separately	
"The number of votes ca	st for the amendment(s) was/were sufficient for	approval
by	(voting group)	·
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholde	er action and shareholder
Dated	12.13.18	
Signature	12.13.18 Proce Corner	
(By a	director, president or other officer – if director	rs or officers have not been
\ <u>-</u>	ted, by an incorporator – if in the hands of a rec	
	inted fiduciary by that fiduciary)	
	ANNA CORRADO	
	(Typed or printed name of person	signing)
	PRESIDENT	
	(Title of person signi	ne)