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.

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Tote: DO NOT hit the REFRESH/RELOAD button on your browser from this page Doing so will generate another cover sheet.	19 J#H
To: Division of Corporations Fax Number : (850)617-6380 From: Account Name : BARINAS & ASSOCIATES INC. Account Number : 120000000082 Phone : (305)871-0889 Fax Number : (305)870-9623 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. ** Email Address:	S TALL
COR AMND/RESTATE/CORRECT OR O/D RESIGN JNC LOGISTICS INC Certificate of Status Certified Copy Page Count Estimated Charge \$43.75	

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation of

JNC LOGISTICS INC			48		.
(Name of Cornoration	n as currently filed	with the Florida D	ept, of State)		
P18000102991					
(Docume	ent Number of Corpo	ration (if known)			
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this <i>Florid</i>	a Profit Corporation	adopts the following	g amendme	nt(s) to
A. Hamending name, enter the new name of the cor	poration:				
JNC LOGISTICS SERVICES INC				The new	
name must be distinguishable and contain the word "Corp.," "Inc.," or Uo.," or the designation "Corp., word "chartered," "professional association," or the d	" "Inc." or "Co".	ompany." or "inco A professional corp	prporated" or the au poration name must o	bbreviation contain the	19.
B. Enter new principal office address, if applicable:					200
(Principal office address MUST BE A STREET ADD.	RESS)			5.40	
					£
					7
C. Enter new malling address, if applicable:					9
(Mailing address MAY BE A POST OFFICE BO)	<u>r</u>)			<u> </u>	Ö
					1
	_				
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in office address:	Florida, enter the	name of the		
Name of New Registered Agent				_	
	(Florida street adi	(ress)		_	
	·		Elecide		
New Registered Office Address:	(City)	gar san v a sagruphik aybibaydidh ah nas	, Florida (Ziy	Code)	
	-				
,					
New Registered Agent's Signature, if changing Reg	ister <u>ed Agent:</u>				
I hereby accept the appointment as registered agent.	I am familiar with a	nd accept the obliga	tions of the position.		
Sign	ature of New Registe	red Agent, if chang	ing	-	

Tο

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 Doc	
X Remove	Y	Mike Jones	
_X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Ashiress
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
5) Change			
Add			
Remove			
O Chara			
6) Change			
Add			
Remove			

Page 2 of 4

Attach additional sheets, if n	tional Articles, ente eccssary). (Be spe	cific)			
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an amendment provides l	or an exchange, rec	inssification, or e	:ancellation of issu	ied shares,	
orovisions for implementing (if not applicable, indicable, indicab	<u>ig the amendment it</u> nie N/A)	not contained in	the amendment i	tself:	
•	·				
					
	·		 		
<u> </u>					
				,	

The date of each amendment(s) ad	option:	_, if other than th
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement 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 ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adoraction was not required.	pted by the incorporators without shareholder action and shareholder	
01/10/2019	A -	
DatedSignaturo	() Ole	
sclocted	rector, president or other officer — if directors or officers have not been it, by an incorporator — if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	INGRID M BLANCO	
	(Typed or printed name of person signing)	

(Title of person signing)

PRESIDENT