## P19000005647

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Amend

MAR 2 9 2019 LALBRITTON

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GS LOGISTIC SE	RVICES INC			
DOCUMENT NUM	D10000005647				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Gilberto Sobredo				
	Name of Contact Person				
	GS LOGISTIC SERVICES INC				
		Firm/ Company			
	14104 SW 51 CT				
	Address				
	MIRAMAR, FL 33027				
	<del> </del>	City/ State and Zip Cod	e		
gsobi	redo2004@yahoo.com				
		sed for future annual report	notification)		
	·	·	·		
For further informatio	n concerning this matter, pleas	se call:			
Gilberto Sobredo		786 at (	942-3149		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check fe	r the following amount made	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		Ameno Divisio	Address Iment Section on of Corporations Building		

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## GS LOGISTIC SERVICES INC

(Name of Corporation as o	currently filed with the Florida Dept. of State)
P19000005647	
(Document No	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutits Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	tion:
	The new
	rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the viation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	[]
	2
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	20
	三 三 三
D. If amending the registered agent and/or registered offi new registered agent and/or the new registered office:	ice aduress in riorida, enter the name of the
Name of New Registered Agent	<del></del>
and the state of t	
(F)	lorida street address)
New Registered Office Address:	, Florida
	(City) (Lip Code)
New Registered Agent's Signature, if changing Registered	1 Agent:
I hereby accept the appointment as registered agent. I am fa	amiliar with and accept the obligations of the position.
Signature o	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: X Change	<u>PT</u>	John Doc	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	Yerenis LLanes	14104 SW 51 CT
X Add			MIRAMAR, FL 33027
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).	(Be specific)			
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an amendment provides for an exch	ange, reclassification,	or cancellation of i	ssued shares.	
provisions for implementing the ame	ndment if not containe	ed in the amendmen	t itself:	
(if not applicable, indicate N/A)				
	<del></del>			
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The date of each amendment(s) late this document was signed.	adoption:	, if other than the
_		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	s block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
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 votes cast for the amendmen sufficient for approval.	nt(s)
	pproved by the shareholders through voting groups. The following state or each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder	lder
03/14/20 Dated Signature	19	
(By a selec	director, president of other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other exinted fiduciary by that fiduciary)	
	Gilberto Sobredo	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	***************************************