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I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: WORLD SERVIC	ES LOGISTICS CORP	·		
DOCUMENT NUME	PEGANATANAG				
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all corres	pondence concerning this ma	tter to the following:			
		PAOLA J DIAZ			
	Name of Contact Person				
	TRAMITES DE INMIGRACION USA CORP				
	Firm/ Company				
	18565 SW 104TH AVE				
	Address				
	MIAMI FL 33157				
		City/ State and Zip Cod	ů.		
		tramitesusacorp@gmail.co	om		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
PAOLA J DIAZ		786 at (7767152		
Name of Contact Person			de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depo	artment of State:		
S35 Filing Fee	☐S43.75 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 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle

Articles of Amendment

to

Articles of Incorporation

.e

World Services Logistics Corp

(Name of Corporation as currently-filed with the Florida Dept. of State)

P19000024049

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006. Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

N/A				Tl
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp." "Inc." or "C	o". A professional cor	orporated" or the poration name mus	The nev abbreviation t contain th
B. Enter new principal office address, (Principal office address MUST BE A S		N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		18565 SW 104TH AV	E MIAMI FL 3315	7
D. If amending the registered agent an new registered agent and/or the new			name of the	
Name of New Registered Agent	18565 SW 104TH AVE MI			
	(Florida stree		 -	_2
New Registered Office Address:	N/A	,	Florida	63 (3
	(1	City)	(Zi _f) Code) (
New Registered Agent's Signature, if c	hanging Registered Agent:	ed. 1 . J. re		FB 3: 41
l hereby accept the appointment as regist	ered agent. I am familiar w.	th and accept the obliga	tions of the position	- - -
	Signature of New Re	gistered Agent, if changi	ng	<u> </u>

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 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>	John Doe	
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	PEDRO ELIAS MONTILLA	18565 SW 104TH AVE MIAMI
X Add			FL 33157
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove		•	
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Atta	mending or adding additional Articles, enter change(s) here: sch additional sheets, if necessary). (Be specific)
1/A	
·	
·;	
	·
. <u>lf a</u>	n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself:
<u>pr</u>	(if not applicable, indicate N/A)
N/A	

The date of each amendment(s) adoption:	07/15/2019	, if other than the
date this document was signed.		, it outer than the
Effective date if applicable:	07/15/2019	
	(no more than 90 days after amendment file a	late)
Note: If the date inserted in this block does no document's effective date on the Department of S		nents, this date will not be listed as the
Adoption of Amendment(s) (CIII	ECK ONE)	
The amendment(s) was/were adopted by the s by the shareholders was/were sufficient for a		amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	shareholders through voting groups. The follogroup entitled to vote separately on the amena	
	dment(s) was/were sufficient for approval	
by	ing group)	
(voti	ing group)	
☐ The amendment(s) was/were adopted by the baction was not required.	poard of directors without shareholder action a	nd shareholder
☐ The amendment(s) was/were adopted by the i action was not required.		nareholder
Dated	29/2019.	
		
	dent of other officer – if directors or officers h rporator – if in the hands of a receiver, trustee.	
appointed fiduciary	•	
	Vinez.P.	
(Typed or printed name of person signing)	
	pusiont.	
	(Title of person signing)	