P190000 44664

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:TWO BROTHER	S FREIGHT & LOGISTIC	S INC
DOCUMENT NUM	D10000044664	1.000.00	
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	ROSA M BULIT		
		Name of Contact Persor	1
	TWO BROTHERS FREIGH	IT & LOGISTICS INC	
		Firm/ Company	
	13536 SW 9 LN	, ,	
		Address	
	MIAMI FL 33184		
		City/ State and Zip Code	2
	MANGGH@YAHOO.COM	4	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas		266-8565
	of Contact Person	at (at () 266-8565 de & Daytime Telephone Number
	or the following amount made		
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

Articles of Incorporation of	:	022 KOV
TWO BROTHERS FREIGHT & LOGISTICS INC		101
(Name of Corporation as currently filed with the Florida Dept. of State) -	<u>a</u>
P19000044664	-	
(Document Number of Corporation (if known)		-
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the fits Articles of Incorporation:	ollowing am en d	lment(
A. If amending name, enter the new name of the corporation:		
	The n	iew
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abb "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must "chartered," "professional association," or the abbreviation "P.A."		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		_
		_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		_
		<u></u>
D. If amending the registered agent and/or registered office address in Florida, enter the name of the		
new registered agent and/or the new registered office address:		
Name of New Registered Agent		
(Florida street address)		
New Registered Office Address: Florida City	(Zip Code)	-
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the po	sition.	
Signature of New Registered Agent, if changing		

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>Y</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Т	JULIO A DIAZ	13536 SW 9 LANE
Add			MIAMI, FL 33184
X Remove			
2) Change	T	MANUEL DIAZ	13536 SW 9 LANE
X Add			MIAMI, FL 33184
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
	
	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself:

The date of each amendment(s) adoption:date this document was signed.		i	f other than the
Effective date if applicable:			
(no more than 90 days after amendmen	t file date)		
Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.	quirements, this date w	ill not	be listed as th
Adoption of Amendment(s) (CHECK ONE)			
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without action was not required.	out shareholder action a	nd shar	reholder
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast by the shareholders was/were sufficient for approval.	for the amendment(s)		
☐ The amendment(s) was/were approved by the shareholders through voting groups. The	ne following statement		
must be separately provided for each voting group entitled to vote separately on the		•	20
"The number of votes cast for the amendment(s) was/were sufficient for approv	ลไ	•	2022 (:0': 16
			ä
by(voting group)	_·`		
(voting group)			
			<u>=:</u>
11/04/2022 Dated		:_	-:1
		~	3
Signature			
(By a director, president or other officer – if directors or offi	cers have not been		
selected, by an incorporator – if in the hands of a receiver, to appointed fiduciary by that fiduciary)	rustee, or other court		
ROSA M BULIT			
(Typed or printed name of person signing)		
VICE PRESIDENT			

(Title of person signing)