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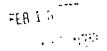
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2022 1314 21 P.1 5: 4.2



COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Solid Gold Logistics Inc.
DOCUMENT NUMBER: Y 1 9 00 0 5 5 4 9 0
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lazaro Osmani Delgado Fuento
Firm/ Company 700 W 35 Ave, #275
Havan Gardens, Ft 33018 City/ State and Zip Code
E-mail address: (to be used for future annual report notification).
For further information concerning this matter, please call:
Azaro Osmani Madado Funta (786) 710 - 8657 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

	Articles of Amendment		<u>:</u> :	202
to Articles of Incorporation			F.	70 77
- 11	of	1 .	2.	ا م
Solid	Gold Logistic	S In C	(((1)	27
NAME OF COTE	ration as currently filed with the Flo	rida Dept. of State)		12:
<u> </u>	3646		= = = = = = = = = = = = = = = = = = = =	<u> </u>
(1.	ocument Number of Corporation (if kn	own)		5.5
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	orida Statutes, this Florida Profit Corp	oration adopts the followin	g amendr	nent(s) to
A. If amending name, enter the new name of t	he corporation:			
	NUA		mi.	
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the	Inc," or "Co". A professional corp			
B. Enter new principal office address, if appli	able:			_
(Principal office address <u>MUST BE A STREET</u>	ADDRESS) 7001	N 3T AVE	#7:	75
	Halear	hurdens fr		518
C. Enter new mailing address, if applicable:		,		
(Mailing address <u>MAY BE A POST OFFIC</u>	<u></u>	7 7 1		
	700	N 35 HVC #	215	- <u>"</u>
	thallak	1 Gardens	P1 2	33018
		T THE CALLEY		,, ,
D. If amending the registered agent and/or re new registered agent and/or the new regist				
new registered agent and/or the new regist	MMP VIGOR	ra Franco	11/10	n/17
Name of New Registered Agent	TOTAL	19 Hanco	_ JVW	HCC C
_21) W 29 St .	tot 5	_	
•	(Florida street address)	1.	7 n	
New Registered Office Address:	malean	, Florida <u>3</u> 2	<u> </u>	_
	(Cuy)	(Zip C	Code)	
New Registered Agent's Signature, if changing Thereby accept the appointment as registered ag		obligations of the position.		
. 7 77	,			
<i>ئى</i> ــــــــــــــــــــــــــــــــــــ				
		·	_	
-	Signature of New Registered Agent, if c	hanging		

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)

Example:

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	PT John Doe	
X Remove	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	? Yudit Alvarez Morera	Lehigh Acres, h 33936
Remove 2) Change Add	VP Luis E Delgado Franco	1454 Country Club PLWV Lehigh Acres, p. 33436
Remove Change Add	P Lazaro Osmani Delgado Fuente	7001 W 35 Ave # 275 Halean Gardens, Pc 3301
Remove 4) Change Add		
Remove 5) Change Add		
Remove 6) Change Add		
Remove		

Attach additional sheets, if necessary).	<u>icles, enter change(s) here:</u> (Be specific)
	1/1 N
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f an amondment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	. ^
	N/+.

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The date of each amendment(s) adoption:date this document was signed.	DMEMDER	IS, WW	, if other than the
Effective date if applicable:	more than 90 days after ame	endment file date)	
Note: If the date inserted in this block does not medocument's effective date on the Department of State		iling requirements, this date v	will not be listed as the
Adoption of Amendment(s) (CHECK	CONE)		
The amendment(s) was/were adopted by the incoraction was not required.	rporators, or board of directo	rs without shareholder action a	and shareholder
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro		es cast for the amendment(s)	
☐ The amendment(s) was/were approved by the sha must be separately provided for each voting grow "The number of votes east for the amendme by	ip entitled to vote separately	on the amendment(s):	2022 1104 2
Dated	or other officer – if directors ator – if in the hands of a rec	eiver, trustee, or other court	2022 HUY 21 FH 5: 42