P190000 60566

(Reque	estor's Name)	
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R WHITE AUG 27 2019

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: BEST FREIGHT S	SOLUTIONS USA INC	
DOCUMENT NU	P10000060566		
The enclosed Articl	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	JOSEPH SCHMITZ		
	-	Name of Contact Perso	n
	EXPATCPA NET LLC		
		Firm/ Company	
	12378 SW 82ND AVE	, -	
	-	Address	
	MIAMI / FLORIDA 33156		
		City/ State and Zip Cod	e
JSG	CHMITZ@EXPATCPA.NET		
		sed for future annual report	notification)
		·	
For further informat	ion concerning this matter, pleas	se call:	
JOSEPH SCHMIT	Z	at (975 - 5798
Nam	e of Contact Person		de & Daytime Telephone Number
Enclosed is a check	for the following amount made j	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A D P.	nailing Address mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amenc Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

BEST FREIGHT SOLUTIONS USA INC

2019 AUG 20 PN 3: 30

(Name of Corporation as curren P19000060566	itly filed with the Florida Dept. of State)
	of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment
. If amending name, enter the new name of the corporation:	
	The new
ame must be distinguishable and contain the word "corporati Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ord "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
Para and any second	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
 If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address 	
Name of New Registered Agent	
	-
(Florida s	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registered Agen	nt:
hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature 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, an 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 = Chie Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officerly 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 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	Ţ	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	P	DIRK CHEE-A-TOW	10901 NW 146TH ST, STE 6-8
Add			HIALEAH GARDENS, FL
X Remove			33018
2) Change	b	MATTHEW GREGORY	1142 SW 147 TERR
X Add			PEMBROKE PINES, FL
Remove			33027
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			·

Attach addition	adding additional Art al sheets, if necessary).	(Be specific)			
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<u>provisions for </u>	nt provides for an exclimplementing the amolicable, indicate N/A)	hange, reclassificati endment if not cont	on, or cancellation ained in the amend	of issued shares, ment itself:	
· ··				•	
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	· · · · ·				-/************************************

	08/09/2019	
The date of each amendment(s) a date 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 E	block does not meet the applicable statutory filing requirements, this date will bepartment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	at for the amendment(s) was/were sufficient for approval	
by	<u></u>	
	(voting group)	
☐ The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ac action was not required.	dopted by the incorporators without shareholder action and shareholder	
08/09/201 Dated_	9	
Signature	ml	
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	_
	MATTHEW GREGORY	
	(Typed or printed name of person signing)	· ·
	PRESIDENT	
	(Title of person signing)	