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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	BBC LOGISTICS	USA, CORP
DOCUMENT NUME	P19000070686	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.
Please return all corres	spondence concerning this man	tter to the following:
	YESENIA RIVERA	
		Name of Contact Person
	8400 NW 36TH STREET SI	Firm/ Company UTTE 450
	DORAL, FL 33166	Address
		City/ State and Zip Code
	E-mail address: (to be us	sed for future annual report notification)
For further information	concerning this matter, pleas	se cath:
YESENIA RIVERA		786 3662632
Name o	of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for	r the following amount made p	payable to the Florida Department of State:
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 phassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently	filed with the Florida Dept. of State)
BBC LOGISTICS USA, CORP	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: N/A	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "I	," "company," or "incorporated" or the abbreviation 20". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office address:	ess in Florida, enter the name of the
N/A	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	et 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 w	ith and accept the obligations of the position.
Signature of New Re	gistered 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.

X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
	S	EDGAR VELASQUEZ	11305 NW 128TH STREET
1) Change X			UNIT 2
Add			MEDLEY, FL33178
2) Change		··	
Add			or on the
Remove			
3) Change			
Add			<u></u>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Demore			

E. If amending or adding additional Articles, enter change(s) here:			
(Attach additional sheets, if necessary). (Be specific)			
N/A			
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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	.	*Bo	T
provisions for implementing the amendment if not contained in the amendment itself:		750	J
(if not applicable, indicate N/A) N/A		=	
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			_

date this document was signed.	(AL2010	
4	/01/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90) days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	not be liste
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
bv	"	
• ,	(voting group)	
☐ The amendment(s) was/were action was not required.	opted by the board of directors without shareholder action and shareholder.	51 AON 61
☐ The amendment(s) was/were ac action was not required.	opted by the incorporators without shareholder action and shareholder	V 15 AM II: 05
11/01/20	19	=
Dated	#설명 	02
Signature M	ARLON CARENES	_
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)	
.,	MARLON CACERES	
	(Typed or printed name of person signing) PRESIDENT	