## PIO DO O O O O O O I

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
<del></del> -	<del></del>	
_		
(Bu	siness Entity Nan	ne)
(Do	cument Number)	<u> </u>
Contition Contino	Cartificates	of Status
Certified Copies	_ Cenincates	or Status
Special Instructions to	Filina Officer:	
	J	

Office Use Only



100349003071

07/28/20--01013--084 \*\*35.00

FILED
2020 JUL 29 AM 9: 30
SECRETARY OF STATE

SE? 19 2020

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: AC EXPORT EXP	RESS CORP		
	BER: P20000001001			
The enclosed Articles	of Amendment and fee are sul	omitted for filing.		
Please return all corre	spondence concerning this man	ter to the following:		
	Jose Alfonzo			
	BGCONGROUP LLC	Name of Contact Person		
	Firm/ Company			
	8180 Nw 36Th St Ste 412			
	Address			
	Doral,Fl.33166			
		City/ State and Zip Code	•	
	info@bgcongroup.com			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
Lina Castillo		at ( 305	776-39-75	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:	
S35 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)	
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 of

5 C	FYPORT	<b>EXPRESS</b>	CORP
	CAPURI	CALKENS	1.1/1/1

(Name of Corporation as curre	ently filed with the Florida Dept. of State)	
P20000001001		
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	his Florida Profit Corporation adopts the following	lowing amendment(s) to
A. If amending name, enter the new name of the corporation:	<u>:</u>	The _new
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". "chartered," "professional association," or the abbreviation "P.	. A professional corporation name must c	eviation "Corp.,"
B. Enter new principal office address, if applicable:		전 <b>22</b>
(Principal office address MUST BE A STREET ADDRESS)		
		29
C. Enter new mailing address, if applicable:	Č T	SE M
(Mailing address MAY BE A POST OFFICE BOX)		10: w D
· · · · · · · · · · · · · · · · · · ·		: 30
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office additional agent and/or the new registered office additional agent and/or the new registered office additional agent and/or registered office and new registered office and new registered office and/or registered office and new registered office and/or registered office and new registered office and/or registered office and/or registered office and new registered office and/or registered office and/or registered office and new registered office and/or registered office and/o		
Name of New Registered Agent		
(Floride	a street address)	,
New Registered Office Address:	, Florida	
New Registered Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Ag	ent:	
Thereby accept the appointment as registered agent. I am famili	iar with and accept the obligations of the posi	tion.
Signature of Ne	w Registered Agent, if changing	
Signature of Ne	n regulered regent, y 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)

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	,, <b>~</b>
Type of Action (Check One)	Title	Name	Address SECULARY DE TO
1) Change	<u>P</u>	CASTILLO, LINA	710 OKCHARD FARNSON N
Add			CLEWISTON, FL. 33440
Remove 2) Change	Þ	CASTILLO, ALVARO	8351 NW 68TH STREET
			MIAMI, FL 33166
Remove Change			
Add			
Remove 4) Change			
Add			-
Remove			
5) Change Add			
Add			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)	
PLEASE INCLUIDE EIN # 84-4186165	
	40
	<del></del>
	·
	2021 Sec.
	2
	Ç07.
	भारत 🕶 🗢
	30
F. If an amendment provides for an exchange, reclassification, or cancellation of issue provisions for implementing the amendment if not contained in the amendment its	ed shares,
(if not applicable, indicate N/A)	<del>XXXX</del>

The date of each amendment(s)	July 01-2020 adoption:	, if other than the
date this document was signed.		,
Ju  Effective date <u>if applicable</u> :	aly 01-2020	
Ellettic date it apprende.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this da Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without shareholder action	on and shareholder
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s sufficient for approval.	s)
must he separately provided j "The number of votes ca by	approved by the shareholders through voting groups. The following stateme for each voting group entitled to vote separately on the amendment(s):  ast for the amendment(s) was/were sufficient for approval  (voting group)  2020  (voting group)  LINA CASTILLO  (Typed or printed name of person signing)	FILED  120 JUL 29 AM 9: 30  ECRETARY OF STATE TALLAHASSEE, FI
	PRESIDENT	
	(Title of person signing)	