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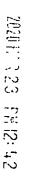
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	ATION:	Osoroma Corp				
	P20000019480					
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.				
Please return all corresp	ondence concerning this ma	tter to the following:				
		Christopher Amoroso				
_		Name of Contact Person	 1			
		Osoroma Corp				
_		Firm/ Company	· -			
		18495 South Dixie Hwy #	416			
_		Address	,			
		Miami, FL 33157				
-		City/ State and Zip Cod	e			
		osoromacorp@yahoo.c	om			
_	E-mail address: (to be us	sed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
Christ	opher Amoroso	at (382-0202			
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 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		Ameno Divisio	Address Iment Section on of Corporations entre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	Osoroma Corp	מנונים בכי חוו מכככ	D- 1, 2
(Name of Corporat	tion as currently filed with th	1.07.22	16
	P20000019480		
(Docu	ment Number of Corporation	(if known)	
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	da Statutes, this <i>Florida Profit</i>	t Corporation adopts the follow	wing amendment(s)
A. If amending name, enter the new name of the	corporation:		
Osoroma Logistics Corp			The new
name must be distinguishable and contain the word "o "Inc.," or Co.," or the designation "Corp," "Inc "chartered," "professional association," or the abb	;" or "Co". A professional		ation "Corp.,"
B. Enter new principal office address, if applicab	<u></u>		
(Principal office address <u>MUST BE A STREET AD</u>	DRESS)		
		· 	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B)	<u>QX</u>)		···········
D. If amending the registered agent and/or registe		a, enter the name of the	
new registered agent and/or the new registered	1 office address:		
Name of New Registered Agent			_
	(Florida street address)		
N. D 1000 111 .		Planida	
New Registered Office Address:	(City)	, Florida (Z	Tip Code)
New Registered Agent's Signature, if changing Re	gistered Agent:		
hereby accept the appointment as registered agent.	I am familiar with and accep	ot the obligations of the positio	on.
C:	materia of Many Danistana J. A.	nt if changing	
Ng)	nature of New Registered Age.	nt, 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)

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					
Type of Action (Check One)	<u>Title</u>	<u>Nar</u>	<u>ne</u>		<u>Addres</u> s		
1) Change					 		
Add							
Remove							
2) Change					 	· 	
Add					_		
Remove 3) Change				_	 		<u>-</u>
Add							<u>-</u>
Remove							
4) Change					 		
Add							
Remove							
5) Change					 	·,	
Add							
Remove							
6) Change							
Add							
Remove							

***************************************	g additional Articles ets, if necessary). (B	Be specific)			
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f an amendment pro	vides for an exchang	e, reclassification,	or cancellation o	f issued shares.	
(if not applicable	menting the amenda	nent ii not contain	ed in the amendic	ient usen:	
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The date of each amendment(s)	adoption:	, if other than the
date this document was signed. Effective date if applicable:	3/18/20	
Enterior date in appareusie.	(no more than 90 days after amendment	file date)
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing recognition of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors witho	ut shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	lopted by the shareholders. The number of votes cast f sufficient for approval.	or the amendment(s)
	oproved by the shareholders through voting groups. The each voting group entitled to vote separately on the e	
"The number of votes ca	st for the amendment(s) was/were sufficient for approve	al
by		•••
	(voting group)	
Dated	3/18/20 Mind	
selec	director, president or other officer – if directors or officed, by an incorporator – if in the hands of a receiver, trued fiduciary by that fiduciary)	
	Christopher Amoroso	
	(Typed or printed name of person signing)
	President	
	(Title of person signing)	

. . . .