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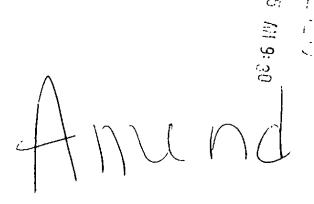
(Re	equestor's Name)	
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TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Osoroma Logistics Corp					
DOCUMENT NUMBER: _	P20000019480				
The enclosed Articles of Ama	endment and fee are su	bmitted for filing.			
Please return all corresponde	nce concerning this ma	tter to the following:			
		Saiben Garzon			
	***	Name of Contact Person	n		
	Osoroma Logistics Corp				
		Firm/ Company			
		18495 South Dixie Hwy #	416		
		Address			
		Miami, FL 33157			
		City/ State and Zip Cod	e		
		osoromacorp@yahoo.cor	n		
E	-mail address: (to be us	sed for future annual report	notification)		
For further information conce	erning this matter, pleas	se call:			
Saiben Ga	arzon	305	382-0202		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for the fo	ollowing amount made	payable to the Florida Dep	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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	Osoroma Logistic	; Corp	
(Name o	of Corporation as currently fil	ed with the Florida Dept. of State)
	P20000019480)	
	(Document Number of Co	rporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Flor	ida Profit Corporation adopts the f	ollowing amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A pr		breviation "Corp.,"
B. Enter new principal office address,			
(Principal office address <u>MUST BE A S</u>	<u>IKEET ADDKESS</u>) -		2
		· .	20
	_		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)			J :-
(maning unaress MAT BE A POST)	<u>UFFICE BUA</u>)		
	_		
	_		<u> </u>
D. If amending the registered agent an new registered agent and/or the nev		in Florida, enter the name of the	
Name of New Registered Agent	Saiben Garzon		
Nume of New Negislerea Ageni	18495 South Dixie Hwy #416	· · · · · · · · · · · · · · · · · · ·	
	(Florida street a	ddress)	
New Registered Office Address:	Miami	. Florida	33157
New Neglistered Office Hadress.	(City		(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		and accept the obligations of the ne	osition
receive accept the appointment as regist	erea agem. Tam jaminar wiin	\sim \sim	
	Scil	604)	
	Signature of New Regist	ered Agent, if 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	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	Р	Chris Amoroso	18495 South Dixie Hwy #416
Add _X Remove			Miami, FL 33157
2) Change	P	Saiben Garzon	18495 South Dixie Hwy #416
X Add			Miami, FL 33157
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if	necessary). (b	Be specific)			
					
<u> </u>		 			
	-				
				 	
	-				-
 		 ;			
				-	
					
If an amendment provides provisions for implement	s for an exchang	<u>e, reclassificati</u>	on, or cancellat	ion of issued sha	ires,
(if not applicable, indi	icate N/A)	icht if not cont.	aned in the am	endment (tsen.	
/A					
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<u> </u>					
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					·
			·		

	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirement pepartment of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	opted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the an ufficient for approval.	nendment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendme	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
•	(voting group)	
June Dated	2, 2020	
Signature	Mul (ay)	
(By a	director, president or other officer - if directors or officers have	
	ed. by an incorporator—if in the hands of a receiver, trustee, or	other court
аррог	nted fiduciary by that fiduciary)	
	Saiben Garzon	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	······································