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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Excellent Delivery Service Carrier Incurporate	ર ત
DOCUMENT NUMBER: 721000019232	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Elijah Williams Name of Contact Person	
Excellent Delivery Service Carrier Incorporated	
15608 SW 127 AVE APT 201 Address	
Micimi FL 33177 City/ State and Zip Code	
City/ State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Elijah Williams at (305) 847 1996 Name of Contact Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status (Additional copy is enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

FIED

Excellent Deliv	ery Service	e Carrier	THE KIND OF THE PARTY OF THE PA
(<u>Name of C</u>	Corporation as currently	filed with the Florida 2001.	HAR:28 PM 2: 24
P210000 19	232	SEC Corporation (if known) TA	PATANY OF STATE
	(Document Number of C	Corporation (if known) TA	LLAHASSEE, FL
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes, this Fl	orida Profit Corporation add	opts the following amendment(s) to
A. If amending name, enter the new name	e of the corporation:		
Exceptional Peliv name must be distinguishable and contain the	ery Service	S INC.	The new
name must be distinguishable and contain the "Inc.," or Co.," or the designation "Corp" chartered," "professional association," or	o," "Inc," or "Co". A		
B. Enter new principal office address, if a (Principal office address MUST BE A STR		NIA	
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF	FICE BOX)	NIA	
D. If amending the registered agent and/o new registered agent and/or the new re	or registered office addre egistered office address:	ss in Florida, enter the nam	e of the
Name of New Registered Agent	N14		
_	(Florida stree	t address)	
New Registered Office Address:	NIA		Florida
	((lityj	(Zip Code)
New Registered Agent's Signature, if char I hereby accept the appointment as registere	nging Registered Agent: d agent. I am familiar wid	th and accept the obligations	of the position.
	Signature of New Reg	istered 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>	<u>John D</u>	<u>oe</u>				
X Remove	<u>v</u>	Mike J	<u>ones</u>				
X Add	<u>sv</u>	Sally S	<u>mith</u>				
Type of Action (Check One)	<u>Title</u>		<u>Name</u>			<u>Addres</u> s	
1) Change	N1	<u>^</u>		NIA		NIA	
Add							,
Remove							
2) Change		_	<u></u>				
Add							
Remove 3) Change							
Add							
Remove							
4) Change		<u></u>					····
Add						,	
Remove							
5) Change							
Add							
Remove							
6) Change							
Add							
Remove							

	ling or adding additional Articles, enter change(s) here: Idditional sheets, if necessary). (Be specific)	
	NIA	
	12 11	
		_
		_
		_
-		
		
an an	endment provides for an exchange, reclassification, or cancellation of issued shares.	
rovisi	ons for implementing the amendment if not contained in the amendment itself:	
(if	not applicable, indicate N/A)	
	NIA	

The date of each amendment(s) adoption:	NIA	, if other than the
date this document was signed.		in other than the
Effective date <u>if applicable</u> :	(no more than 90 days after a	amendment file date)
Note: If the date inserted in this block does in document's effective date on the Department or		ry filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)	
The amendment(s) was/were adopted by the action was not required.	e incorporators, or board of direc	ctors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		votes cast for the amendment(s)
The amendment(s) was/were approved by the must be separately provided for each voting		
"The number of votes cast for the ame	endment(s) was/were sufficient	for approval
by	oting group)	 .
(vo	ning group)	
Dated 3 15 2	021	
Signature		
(By a director, pres selected, by an inc	sident or other officer – if direct corporator – if in the hands of a ry by that fiduciary)	
Ei	(Typed or printed name of pers	M Son signing)