## P2100028935

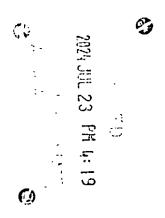
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(Document Number)
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

.

NAME OF CORPOR	ATION: FR LOGISTICS N	ETWORK INC	
DOCUMENT NUMB	P21000028825	·,	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	condence concerning this ma	tter to the following:	
		ANA K DA SILVA	
_		Name of Contact Person	1
		JDK NETWORK LLC	
-		Firm/ Company	
	!	0893 NW 17TH ST UNIT	121
_		Address	
		DORAL, FL 33172	
_		City/ State and Zip Code	e
	AKDAS	ILVA@JDKNETWORK.C	OM
-	E-mail address: (to be us	sed for future annual report	notification)
For further information ANA K DA SILVA	concerning this matter, pleas	se call: at (at	) 7757331
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:
■ \$35 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)
Amer Divis P.O. 1	ng Address adment Section ion of Corporations 3ox 6327 nassee, FL 32314	Amend Divisio The Co	Address Innent Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FR LOGISTICS NETWORK INC

(Name of Corporation as currently	filed with the Florida Dept, of State)
P21000028825	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
A&V PRODUCTS CORP	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	224
	- Com-
	<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
<u> </u>	
D. If amending the registered agent and/or registered office addre	us in Florida, anton the name of the
new registered agent and/or the new registered office address;	55 III I WING, CHIEF THE HAIRE OF THE
Name of New Registered Agent	
Maine of New Registered Agent	
(Florida stree	et addressi
ji maa maa	
New Registered Office Address:	, Florida

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.

Example: X Change	<u>PT</u>	John Do	Nt.	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Address</u>
1)Change		<del></del>		
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Remove				
4) Change				
Add		_		
Remove				
5) Change				
Add			· ·	
Remove				
				<u> </u>
6)Change	-			
Add				
Remove				

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (I) not applicable, indicate N/-1)		(Be specific)
provisions for implementing the amendment if not contained in the amendment itself:	. <u> </u>	
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provisions for implementing the amendment if not contained in the amendment itself:		
provisions for implementing the amendment if not contained in the amendment itself:		
(if not applicable, indicate N/A)		
	If an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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	provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

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The date of each amendment(s) a	idoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(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 requirement epartment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the am ufficient for approval.	endment(s)
•	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	•
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
• • • • • • • • • • • • • • • • • • • •	(voting group)	
Signature (By a c selecte	lirector, president or other officer – if directors or officers have ed, by an incorporator – if in the hands of a receiver, trustee, or officers have ed.	
иррон	nted fiduciary by that fiduciary)	
	JOSE H FUENTES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	· <del></del>

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