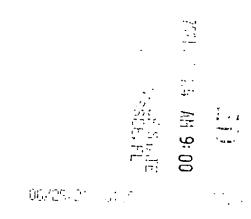
P21000044604

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: HILT LOC	GISTCS INC
NAME OF CORPORATION.	
DOCUMENT NUMBER: P2100004460	
The enclosed Articles of Amendment and	fee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
DANIELA F. COL	MENARES LEAL
-	Name of Contact Person
HLT LOGISTCS I	NC
	Firm/ Company
2020 NW 129TH A	VE STE 208
	Address
MIAM1, FL 33182	
	City/ State and Zip Code
info@jcbsolu	TIONSINC.NET
E-mail address	: (to be used for future annual report notification)
For further information concerning this ma	atter, please call:
DANIELA F. COLMENARES LEAL	at (786) 569-4416 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amo	unt made payable to the Florida Department of State:
S35 Filing Fee \$43.75 Filin Certificate o	
Mailing Address Amendment Section Division of Corporation 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

HLT LOGISTCS INC	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P210000:4604	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following Anicles of Incorporation:	ng amendment(s) to
A If amending name, enter the new name of the corporation:	
HLT LOGISTICS INC	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviat "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must conta "chartered." "professional association," or the abbreviation "P.A."	ion "Corp" iin the word
B. Enter new principal office address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
Enter new maiting address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
	1 -
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered office address:	• 41
	34) E
Name of New Registered Agent	ے ہے۔
(Florida street address)	M 9: 00
(Florida Sireel address)	וגו 🗀
New Registered Office Address:, Florida, Ciry)	Code)
(City)	(Mac)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position	
Signature of New Registered Agent, if changing	_
Check if applicable	
The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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 Doc	
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			
Add			
Remove			
2) Change			
Add			
· Remove			
3) Change			
· Add			
Remove		·	
4) Change			
Add			
Ramove			
5) Change			
Add		-	. ,
Remove			
6) Change			
Add			
Remove			

i,

Jan I I	itional Articles, enter change(s) here:		
tach additional sheets, if i	necessary). (Be specific)		
			
			
			
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Can emondment provides	for an exchange, reclassification, or cand	eliation of issued shares	
provisions for implement	ing the amendment if not contained in the	e amendment itself:	
(if not applicable, indi	cate N/A)		
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The date of each amendment(s	adoption:, if other than the
date this document was signed.	
Effective date if applicable:	<u> </u>
	(no more than 90 days after amendment file date)
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
' i by	11
-, <u></u>	(voting group)
DatedSignature	
5 e lec	director, president or other officer – if directors or officers have not been too by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	DANIELA F. COLMENARES LEAL
	(Typed or printed name of person signing)
	PRESIDENT
•	(Title of person signing)

•

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