P21000056387

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2021 AUG -2 PM 1: 35 SECNETARY OF STATE

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AUG 2 2021

COVER LETTER.

TO: Amendment Se Division of Cor			•			
NAME OF CORPO	DRATION: TRAIGOTODO C	UBA CORP				
	P21000056387					
The enclosed Article	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	KARINA PEREZ PEREZ					
		Name of Contact Person	<u> </u>			
	VICEPRESIDENT					
	<u></u>	Firm/ Company				
210 FONTAINEBLEAU BLVD APT 314						
		Address				
MIAMI, FL , 33172						
City/ State and Zip Code					2021	
CUBA@TRAIGOTODO.COM					AUG	
	E-mail address: (to be us	sed for future annual report	notification)	- 58.5 - 58.5 - 58.5	2	;
For further informati	on concerning this matter, plea	se call:			1021 AUG -2 FH 1:3	S. S.
KARINA PEREZ PEREZ		786 at (4242767		1: 35	`
Name	of Contact Person		de & Daytime Telephone N	Vumber	,	
Enclosed is a check t	for the following amount made	payable to the Florida Dep	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)			
Mailing Address		Street Address				

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

TRAIGOTODO CUBA CORP

(Name of Corporation as currently	filed with the Florida Dept. of State)	
(Document Number of C		
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) to
A. If amending name, enter the new name of the corporation:		
TRAIGOTODO WORLDWIDE LOGISTICS (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 <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SECRETARY OF TALLAHASSES	2021 AUG -2 PH
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:		1:35
Name of New Registered Agent		
(Florida stree	et address)	
New Registered Office Address:	, Florida	.
(C.	Zity) (Zip Co	de)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with the second se	th and accept the obligations of the position.	
Signature of New Reg	gistered Agent, if changing	
Check if applicable	Nº - Nº V	

☐ 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	PT	<u>John Doe</u>	
X Remove	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change	 -		
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			.
Remove			
Kemove			

	ing additional Arti eets, if necessary).	(Be specific)			
					
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in amendment pr	ovides for an exch	iange, reclassifica	tion, or cancellat	ion of issued share.	š.
<u>ovisions</u> for <u>imp</u> l	lementing the ame	ndment if not con	tained in the amo	endment itself:	-1
(if not analisah	le, indicate N/A)			-	
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Ty and applicate					
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The date of each amendment(s) ad date this document was signed.	option:	, if other than the
· ·		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more man so days difer tonenament file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, the partment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholde	raction and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendr fficient for approval.	nent(s)
☐ The amendment(s) was/were app must be separately provided for a	roved by the shareholders through voting groups. The following staceach voting group entitled to vote separately on the amendment(s):	atement
"The number of votes cast i	or the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
Dated	rector, president or other officer – if directors or officers have not t	
selected	tector, present or other officer – If directors or officers have not f , by an incorporator – if in the hands of a receiver, trustee, or other and fiduciary by that fiduciary)	court
	KARINA PEREZ PEREZ	
-	(Typed or printed name of person signing)	
	VICEPRESIDENT	
-	(Title of person signing)	