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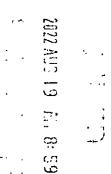
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TO: Amendment Section Division of Corporations				•	•	
NAME OF CORPORATION:	PRO LOGISTIC	CS SERVICES IN	IC			
DOCUMENT NUMBER:	P21000087190					
The enclosed Articles of Amenda	<i>rent</i> and fee are su	bmitted for tiling.				
Please return all correspondence c	concerning this ma	tter to the followi	ng:			
		SHANTAL (EREZO			
		Name of Cont	act Person	1		
	PRO	LOGISTICS SE	RVICES	INC		
	·	Firm/ Con	npany			
400 NW 28TH AVENUE						
		Addre	SS			
		MIAMI, FLORII	A 33125	5		
		City/ State and	Zip Cod	e		
	PROLOGIS	STICSSERVICES	INC@GN	MAIL COM		
E-mai	l address: (to be u		_		-	
For further information concerning	g this matter, plea	se call:			•	
SHANTAL CER	EZO	at (305	331-1990		
Name of Contact I	Person		Area Co	de & Daytime Telephone Ni	mber ·	
Enclosed is a check for the follow	ring amount made	payable to the Flo	rida Depa	artment of State:		
_	.75 Filing Fee & ifficate of Status	S43.75 Filing Certified Cop (Additional co- enclosed)	y.	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327			Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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Articles of Amendment to Articles of Incorporation of

PRO LOGISTICS SERVICES INC

(Name of Corporation as currently filed with the Florida Dept. of State) P21000087190 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 400 NW 28TH AVENUE B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) MIAMI, FLORIDA 33125 C. Enter new mailing address, if applicable: 400 NW 28TH AVENUE (Mailing address MAY BE A POST OFFICE BOX) MIAMI, FLORIDA 33125 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: 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) (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 Doe	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	D	MARKO RADOVANOVIC	8400 CYPRESS LANE
Add			6A
XRemove			BOCA RATON, FL 33433
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			- 1
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	
	
	
	
 	
If an arrandment provides for an aval	hange made official or an association of issued shares
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the unite	addition to the wife in the wi
(if not applicable, indicate N/A)	

.

•	08/15/2022	
The date of each amendment(s) add date this document was signed.	option:	, if other than the
Effective date if applicable:	08/15/2022	
	(no more than 90 days after amendmen	t file date)
Note: If the date inserted in this blo document's effective date on the Dep	artment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop action was not required.	sted by the incorporators, or board of directors with	out shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	sted by the shareholders. The number of votes east ficient for approval.	for the amendment(s)
	oved by the shareholders through voting groups. The ach voting group entitled to vote separately on the a	
"The number of votes cast for	or the amendment(s) was/were sufficient for approv	વા
by		 ·
	(voting group)	
Dated	08/15/2022	
selected,	ector, president or other officer – if directors or offi by an incorporator – if in the hands of a receiver, to d fiduciary by that fiduciary)	
	SHANTAL CEREZO	
-	(Typed or printed name of person signing	2)
	PRESIDENT	

(Title of person signing)