## P21 CCCC 91574

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Tagahka Logistic Inc						
DOCUMENT NUMBER: P21000091574						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Alla Vyazovkjna Nante of Contact Person  Taganka Logistics Inc  Firm/Company  2401 Van Buren Stabt 13  Address  Wollywood, FL 33020  City/State and Zip Code						
E-mail address: (to be lesed for future annual report notification)  For further information concerning this matter, please call:						
Alla Vyazavina at 470 ,2556550						
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:						
□ \$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  □ \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)  □ \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)						
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee						

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

AV

## **Articles of Amendment** to Articles of Incorporation of

FILED

2: 48

Taganka Lopi	stics The 2021 NOV 18 PM 2:1
	ly filed with the Florida Dept. of State) SECRETARY OF STA
P2100009	
	of Corporation (if known)
·	•
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name must contain the word
B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS)	2401 Van buxen St
	hollywood, FL 33020
C. Enter new mailing address, if applicable:	V
(Mailing address MAY BE A POST OFFICE BOX)	1761 N Joung Circle
	3te 3 # 125
	Wollywood FL 33020
	O I
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
new registered agent and/or the new registered office address	<u>.</u>
Name of New Registered Agent	
(Florida str	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v	
	7 0 7 1
Signature of New R	egistered 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	<u>V</u>	Mike Jones	
_X Add	SY	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			<u></u>
Remove Change			
Add			
Remove			
4) Change			
Remove			<del></del>
5) Change	<del> </del>	· · · · · · · · · · · · · · · · · · ·	
Add			<del> </del>
Remove			
б) Change			
Add			
Remove			

	(Be specific)
The state of the s	
f an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
f an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:

The date of each amend date this document was si		15 N	ovember	2021	, if other than
Effective date if applicat	ole:	no more than 90 (	days after amend	ment file date)	<del></del>
Note: If the date inserted document's effective date			ole statutory filin	g requirements, this d	ate will not be listed as
Adoption of Amendmen	t(s) (CHEC	CK ONE)			
☐ The amendment(s) was action was not required		corporators, or bo	ard of directors v	vithout shareholder act	ion and shareholder
The amendment(s) was	s/were adopted by the sha as/were sufficient for app		number of votes c	ast for the amendment	(s)
☐ The amendment(s) was must be separately pro	s/were approved by the sl ovided for each voting gr				ient
"The number of	votes cast for the amendr	nent(s) was/were	sufficient for app	oroval	
by	(voting	armeni		·"	
	_				
Dated_	15 Novemb	er 2021	<del></del>		
Signatu	re Alay				
Ç	(By a director, presider selected, by an incorporate appointed fiduciary by	orator – if in the l			
	(Tv	#//Q ped or printed na	Vyazovki me of person sign	NQ ning)	
		Owne	R		
	(Tit	tle of person signi	ing)		

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