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Account#: I20000000088

Date:	06/15/2022	
Name:	A	
Reference #		
	LEGEND YACHT	TRANSPORT USA INC.
	es of Incorporation/Authorizatio	
✓ Amer	ndment	
☐ Chan	ge of Agent	
Reins	statement	
☐ Conv	ersion	
Merg	er	
☐ Disso	olution/Withdrawal	
Fictiti	ous Name	
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Account#: 120000000088

Date: _	06/15/2022	
Name:	Chris Vick	<u>-</u>
Refere	nce #: 1710896	_
Entity	Name: LEGEND YACHT	TRANSPORT USA INC.
	Articles of Incorporation/Authorization	to Transact Business
V	Amendment	
	Change of Agent	
	Reinstatement	
	Conversion	
	Merger	
	Dissolution/Withdrawal	
	Fictitious Name	
~	OtherCERTIFIE	D COPY UPON FILING
Author Signat	ized Amount: / \$43.75	

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LEGEND YACHT	TRANSPORT USA INC				
DOCUMENT NUME	BER:					
	of Amendment and fee are sul	omitted for filing.				
Please return all corres	pondence concerning this mat	ter to the following:				
	Sharon Yong					
	Name of Contact Person					
	LEGEND YACHT TRANSP	ORT USA INC				
	***	Firm/ Company				
	400 NW 7TH AVENUE 143	10				
		Address				
	FORT LAUDERDALE, FL	33311				
		City/ State and Zip Code	•			
	Sharon.yong@legendlogistic	sltd.com				
	E-mail address: (to be us	ed for future annual report	notification)			
For further information	n concerning this matter, pleas	se call:				
Delaney J. Jaffarian		at () 263-1489 de & Daytime Telephone Number			
Name	of Contact Person	Area Cor	de & Daytime Telephone Number			
Enclosed is a check fo	r 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)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section in of Corporations entre of Tallahassee V. Monroe Street, Suite 810 issee, FL 32303			

Articles of Amendment to

	Articles of Am to Articles of Inco			Section 1
LEGEND YACHT TRANSPORT USA I	NC			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(Name o	f Corporation as currently	filed with the Florida D	ept. of State)	TO SERVICE OF THE PERSON OF TH
P21000097626				<u> </u>
	(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	1006, Florida Statutes, this Fo	lorida Profit Corporation	adopts the follo	wing amendment(s) to
A. If amending name, enter the new na	me of the corporation:			
				The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Co.," chartered," "professional association,"	orp," "Inc," or "Co". A	mpany," or "incorporate professional corporation	ed" or the abbrev n name must co	nation "Corp.,"
B. Enter new principal office address, i (Principal office address MUST BE A ST				
C. Enter new mailing address, if appli- (Mailing address MAY BE A POST C				
D. If amending the registered agent an new registered agent and/or the new		es in Florida, enter the	name of the	
Name of New Registered Agent				
	(Florida stree		 -	
	(r tortua stree	et duaress)		
New Registered Office Address:	(1)	City)	, Florida(Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as registe	hanging Registered Agent: ered agent. I am familiar wi	ith and accept the obliga	tions of the positi	ion.
	Signature of New Re	gistered Agent, if changin	ng	

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)

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	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	KIAT, TAN C	400 NW 7TH AVENUE 14310
Add			FORT LAUDERDALE, FL 33311
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)			
		•		
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f an amendment provides for an exc	hange, reclassification, o	r cancellation of i	ssued shares,	
f an amendment provides for an exc	hange, reclassification, c	r cancellation of h	ssued shares,	
provisions for implementing the am	hange, reclassification, cendment if not contained	r cancellation of is	ssued shares, t itself:	
f an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	hange, reclassification, cendment if not contained	r cancellation of is	ssued shares, it itself:	
provisions for implementing the am	hange, reclassification, of endment if not contained	r cancellation of i	ssued shares, it itself:	
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provisions for implementing the am	hange, reclassification, of endment if not contained	r cancellation of Is I in the amendmer	ssued shares, it itself:	
provisions for implementing the am	hange, reclassification, on the contained th	r cancellation of i	ssued shares, t itself:	
provisions for implementing the am	hange, reclassification, cendment if not contained	r cancellation of is	ssued shares, it itself:	
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provisions for implementing the am	hange, reclassification, cendment if not contained	r cancellation of i	ssued shares, t itself:	
provisions for implementing the am	hange, reclassification, of endment if not contained	r cancellation of i	ssued shares, it itself:	

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 c	ays after amendment file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicat Department of State's records.	ele statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	dopted by the incorporators, or bo	ard of directors without shareholder action and shareholder
The amendment(s) was/were as by the shareholders was/were		umber of votes cast for the amendment(s)
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders throu or each voting group entitled to vo	gh voting groups. The following statement te separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were	sufficient for approval
by	(voting group)	,
	(voting group)	
12th June Dated		
D	ave Holley	
(By a selec	director, president or other officer	- if directors or officers have not been nands of a receiver, trustee, or other court
	David J. Holley	
	(Typed or printed na	me of person signing)
	President	
	(Title of person sign	ing)

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LEGEND YACHT	TRANSPORT USA INC		
DOCUMENT NUMI				
	of Amendment and fee are sub	omitted for filing.		
Please return all corre	spondence concerning this mat	ter to the following:		
	Sharon Yong			
		Name of Contact Person		
	LEGEND YACHT TRANSPO			
	LEGEND FACTI TRANSPO			
		Firm/ Company		
	400 NW 7TH A VENUE 1431			
		Address		
	FORT LAUDERDALE, FL 3	3311		
		City/ State and Zip Code		
	Sharon.yong@legendlogistics	sltd.com		
	E-mail address: (to be us	ed for future annual report n	otification)	
For further informatio	n concerning this matter, pleas	e call:		
Delaney J. Jaffarian		at (263-1489	
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	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div P.O	ling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Division The Cer 2415 N	address nent Section of Corporations ntre of Tallahassee Monroe Street, Suite 810 see, FL 32303	