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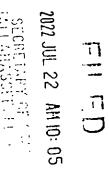
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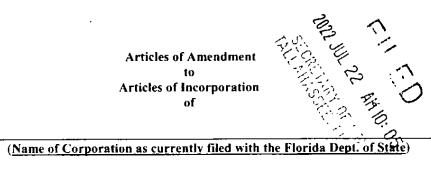
07/22/22--01017--013 **43.75



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: One Distributor Service Inc						
DOCUMENT NUMBER: P22000042199						
The enclosed Articles of	Amendment and fee are sul	bmitted for filing.				
Please return all corresp	ondence concerning this mat	tter to the following:				
1	van Ramirez					
-	Name of Contact Person					
_	Firm/ Company					
1	5861 NW 52 ave apt 207					
_		Address	· <u>·</u>			
<u> </u>	Miami Gardens FL 33014					
		City/ State and Zip Code	:			
-	E-mail address: (to be us	ed for future annual report	notification)			
	`	·				
For further information	concerning this matter, pleas	se call:				
Ivan Ramirez		at (⁷⁸⁶	_) 2099355			
Name of Contact Person			de & Daytime Telephone Number			
Enclosed is a check for	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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303			



One Distributor Service Inc P22000042199

(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendmen
A. If amending name, enter the new name of the corporation:	
Kenedu Transhipper Services Inc	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.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	15861 NW 52 Ave apt 207
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Miami Gardens, FL 33014
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address Name of New Registered Agent	dress in Florida, enter the name of the
(Florida s	street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian	

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	PT	John Do	<u>e</u>	
X Remove	$\underline{\mathbf{v}}$	Mike Jos	nes	
X Add	<u>sv</u>	Sally Sm	<u>uith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		<u> </u>		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	(Be specific)			
				-
	<u> </u>	A - #47		
an amendment provides for an excl	nange, reclassification, o	r cancellation of issu	ed shares,	
	ndmont if not contains	in the amendment i	<u>tself:</u>	
provisions for implementing the ame	nament ii not containet			
provisions for implementing the amo (if not applicable, indicate N/A)	endment if not container			
provisions for implementing the ame	endment ii not contained			
provisions for implementing the ame	endment if not contained			
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provisions for implementing the ame	endment if not contained			

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The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days af	tor amondment file date)
	(no more than 90 days ag	er amenament file date)
Note: If the date inserted in this document's effective date on the		utory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of	directors without shareholder action and shareholder
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number sufficient for approval.	of votes cast for the amendment(s)
☐ The amendment(s) was/were a must be separately provided f	pproved by the shareholders through voti or each voting group entitled to vote sepa	ng groups. The following statement wrately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were suffici	ent for approval
lvan Ramirez		,"
<u> </u>	(voting group)	
07/16/20 Dated	22	
Signature		
selec	director, president of other officer – if di ted, by an incorporator – if in the hands of inted tiduciary by that fiduciary)	
	Ivan Ramirez	
	(Typed or printed name of	person signing)
	President	
	(Title of person signing)	