## P23000085838

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## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: ARTIS LOGISTICS INC DOCUMENT NUMBER: P23000085838 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: KONSTANTIN SHABASHOV Name of Contact Person ARTIS LOGISTICS INC Firm/ Company 2500 HOLLYWOOD BLVD STE 309-2 Address HOLLYWOOD FL 33020 City/ State and Zip Code KONSTANTIN.SHABASHOV@ARTISLOGISTICS-INC.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (917) 9027928

Area Code & Daytime Telephone Number KONSTANTIN SHABASHOV Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

**Mailing Address** 

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

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

to

ARTIS LOGISTICS INC

(Name o	f Corporation as curren	tly filed with the Florida Dept. of State)		
P23000085838				
	(Document Number	of Corporation (if known)	-	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendm	ent(s	
A. If amending name, enter the new na	ime of the corporation:			
	<del> </del>	The new		
	orp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp., A professional corporation name must contain the wor, "		
B. Enter new principal office address, if applicable:		2500 HOLLYWOOD BLVD STE 309-2		
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )	HOLLYWOOD FL 33020		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2500 HOLLYWOOD BLVD STE 309-2		
		HOLLYWOOD FL 33020		
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent				
	(Florida s	street address)		
New Registered Office Address:	N/A	. Florida <sup>N/A</sup>		
		(City) (Zip Code)		
New Registered Agent's Signature, if cl I hereby accept the appointment as registe	hanging Registered Ager ered agent. I am familian	nt: r with and accept the obligations of the position.		
<del></del>	Signature of New	Registered Agent, if changing		
Check if annlicable	-			

☐ 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		
_ <u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change		N/A		
Add				
Remove				
2) Change		N/A		
Add				
Remove 3) Change		N/A		
Add				
Remove				
4) Change		N/A		
Add				
Remove				
5) Change		N/A		
Add				
Remove				
6) Change	_	N/A	<u> </u>	
Add				
Remove				

/A	itional sheets,	ij necessary).	(Be specific)				
							-
			<del></del>		<u> </u>		
	<del></del>	<del></del>			<del></del>		
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			•				
	_						
If an amen	dment provid	es for an exch	ange, reclassif	fication, or can	cellation of issue	ed shares.	
provisions	s for implemen	nting the amer	ndment if not	contained in th	e amendment it	self:	
(if not	t applicable, in	dicate N/A)					
A							
	<del></del>						
	<u> </u>				<del></del>		
<del></del> -							
		<u>.</u>					

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
N/A Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ade action was not required.	opted by the incorporators, or board of directors without shareholder ac	tion and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment ufficient for approval.	nt(s)
	proved by the shareholders through voting groups. The following state reach voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	<b>,</b>	
, .	(voting group)	
04/29/2024 Dated	<del></del>	
selecte	lirector, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	
	KONSTANTIN SHABASHOV	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	