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SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: HNR Logistics C	orp		
DOCUMENT NUME	P24000031783			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	Clara De Marchena			
		Name of Contact Person	1	
	Clear Accounting & Tax So	olutions LLC		
		Firm/ Company		
	869 Sand Creek Cir			
	Address			
	Weston, FL 33327			
		City/ State and Zip Cod	e	
	donfedor@cbfgroupllc.com	1		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
Clara De Marchena		at (862	6688813	
Name of Contact Person			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	S43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
· Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 chassee, FL 32314	Amend Division The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

HNR Logistics Corp	
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P24000031783	
(Document Number of	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.	'company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	16241 SW 141st Ave
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Miami, FL 33177
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	202 1 A
(Manual and Case 1997)	
	<u>%2 </u>
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office addres	
Name of New Registered Agent	<u></u>
(Florida si	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	ıt:
I hereby accept the appointment as registered agent. I am familiar	
Signature of New 1	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	PT	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>	Address
1) Change	VP	Ronald S Garcia Mendoza	14324 NE 2nd Pl
Add			Miami, FL 33161
X Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			·
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)	nge(s) here:			
				-	
		···			
				· · · · · · · · · · · · · · · · · · ·	
	-				
					
		~		- L	
If an amendment provides for an e provisions for implementing the a	xchange, reclassion	contained in the	amendment itse	snares, lf:	
(if not applicable, indicate N/A)	·			
					•
				· ·-	
				<u> </u>	-

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.	03/2024	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this bedocument's effective date on the De	plock does not meet the applicable statutory filing requirent opartment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes east for the afficient for approval.	amendment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendate	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	<u>, </u>	
	(voting group)	
August 3, 1	2024	
Dated		
	There I have	
Signature	lirector, president or other officer – if directors or officers ha	ive not been
` •	d, by an incorporator – if in the hands of a receiver, trustee,	
appoin	ted fiduciary by that fiduciary)	
	Henio M Baez Severino	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	