## 24000064143

Office Use Only



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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: ROUTE 88 LOGIC	CTICE INC	
DOCUMENT NUME	P24000064143		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	KOHN, NAFTOLOH T		
		Name of Contact Person	1
		Firm/ Company	
	16754 KINGMAN REEF ST	<u> </u>	
	WIMAUMA, FL 33598	Address	
		City/ State and Zip Cod	e
	route88logisticsinc@gmail.co	om	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
KOHN, NAFTOLOH	Т	at (	_) 241-3061
Name (	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 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)
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

**ROUTE 88 LOGICTICE INC** 

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

( <u>Name</u>	of Corporation as current	ly filed with the Florida Dept. of Stat	<u>:e</u> )		
24000064143					
	(Document Number of	of Corporation (if known)			
rsuant to the provisions of section 607 Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the	following	g amer	idment(
If amending name, enter the new n	ame of the corporation:				
OUTE 88 LOGISTICS INC				The	new
	Corp," "Inc," or "Co"	company," or "incorporated" or the a A professional corporation name mu "		n "Co	rp., ''
. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRESS</u> )		16754 KINGMAN REEF ST			
		WIMAUMA, FL 33598			
					_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		16754 KINGMAN REEF ST			
		WIMAUMA, FL 33598		24 Ot	
			: -	77 2	
				<del></del>	<del>~;~</del> 1" \
If amending the registered agent an new registered agent and/or the ne		<u>lress in Florida, enter the name of th</u> s:	<u>e</u> :	=:	$\Box$
Name of New Registered Agent	KOHN, NAFTOLOH T	<u></u>		ž.	
Name of Iven Regimered rigen	16754 KINGMAN REEF ST		3 +	י פי	
	(Florida st	reet address)		•	
New Registered Office Address:	WIMAUMA , Flori		33598 1		
		(City)		ode)	

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	
X Add	<u>sv</u>	Sally Smith	
Type of Action	<u>Title</u>	<u>Name</u>	Address
(Check One)  1)Change	P	KOHN, NAFTOLOH T	16754 KINGMAN REEF ST
Add			WIMAUMA, FL 33598
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).	cles, enter change(s) here: (Be specific)	
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	<del> </del>	
lf an amendment provides for an excl	ange, reclassification, or cancellation of issued	i shares,
provisions for implementing the ame	ndment if not contained in the amendment itse	<u>elf:</u>
(if not applicable, indicate N/A)		
		<del></del>

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The date of each amandmant/s	10/14/2024 adoption:	ياه مصامه مصام ۱۲
date this document was signed.	adoption:	, ii other than ti
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file	date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing require Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sh	nareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	idopted by the shareholders. The number of votes cast for th sufficient for approval.	e amendment(s)
must be separately provided	approved by the shareholders through voting groups. The following group entitled to vote separately on the amenast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
10/20/20	124	
Dated		
Signature		
(By selc	director, president or other officer – if directors or officers beted, by an incorporator – if in the hands of a receiver, trustee sinted fiduciary by that fiduciary)	
	KOHN, NAFTOLOH T	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	