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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: <u>TOBRUK</u>	INTERNATION	IAL CORPORATION
DOCUMENT NUMB	er: <u>/7372.</u>	5	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	condence concerning this ma	tter to the following:	
, <b></b>	SILVIA GUT	TIERREZ	,
		Name of Contact Person	n
2	TOBRUK INTERN	ATIONAL COR	CORATION
		Firm/ Company	
_	6970 NW 5	O STREET	
		Address	
_	miam:	FC 3314 City/ State and Zip Cod	66
		•	
	silviageti	clogistics. c	com
	E-mail address: (to be us	sed for Miture annual report	notification)
For further information	concerning this matter, pleas	se call:	
SILVIA	GUTIERREZ	at ( 305	yok - 0264 de & Daytime Telephone Number
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)
			·
	ng Address		Address
	Amendment Section Amendment Section  Division of Corporations Division of Corporations		

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

TIONAL CORPORATION (Name of Corporation as currently filed with the Florida Dept. of State) Vフュフユく (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the cornoration: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida sireei address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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.

X.Change	<u>PT</u>	John Doc				٠
X Remove	¥	Mike Jones			.*	,
X Add	<u>sv</u>	Sally Smith				,
Type of Action (Check One)	Title	Name	Ł		Address	
1) Change	DIR <u>ector</u>	\$ <u>-5</u> AC	<u>OUELINE</u>	DURAND	6970 NW	50 STREE
Add					MIAMI	FC 33166
_X Remove						
2) Change	<del></del>		<del></del>		<del></del>	
Add	-					
Remove						<u>-</u>
3 ) Change		<del>.</del>				<u> </u>
Add				,		
Remove	·				·	<del></del>
4) Change	<del></del>	· —		<u> </u>	<del>_</del>	· · · · · · · · · · · · · · · · · · ·
Add .			•			•
Remove			•			
5) Change		<u> </u>			· · · · · · · · · · · · · · · · · · ·	
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6) Change	, 	· ·		<u>.</u>		
Add		`				
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amending or adding additional Arti ttach additional sheets, if necessary).	(Be specific)		
	N/A		
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an amendment provides for an exch roylsions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or candiment if not contained in t	ncellation of issued shares, he amendment itself:	
	NA		
			10.1
<u> </u>			
			•

The date of each amendment(s) adoption: MAY 19 2016 DATE AS SIGNED if other than the
date this document was signed.
Effective date <u>if applicable</u> :
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by"
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signature Star H. H.
(By a director, president or other officer - if directors or officers have not been
selected, by an incorporator $-if$ in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
SILVIA GUTIERE Z  (Typed or printed name of person signing)
PRESIDENT
(Title of person signing)