P12000018471

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SECRETARY OF STATE

Amend

AUG 14 2012 T. CAULEY

COVER LETTER

TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION: TCP Logistics, Inc.				
DOCUMENT NUMBER: P12000018471				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Mark Chaves	_			
Name of Contact Person				
Daszkal Bolton, LLP				
Firm/ Company				
490 Sawgrass Corporate Pkwy, Suite 200				
Address				
Sunrise, FL 33325				
City/ State and Zip Code	_			
lmiller@daszkalbolton.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Mark A. Chaves at (561) 886-5278				
Name of Contact Person Area Code & Daytime Telephone Number	er			
Enclosed is a check for the following amount made payable to the Florida Department of State:				
■ \$35 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 Street Address				
Amendment Section Amendment Section				
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building				
Tallahassee, FL 32314 Cinton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



TCP Logistics, Inc.

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(Name of Corporation as currently filed with the F	lorida Dept. of State)	
P12000018471		
(Document Number of Corporation (i	f 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 "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered." "professional association," or the abbreviation "	'Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	490 Sawgrass Corporate Pkwy	
(Principal office address MUST BE A STREET ADDRESS)	Suite 200	
	Sunrise, FL 33325	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	490 Sawgrass Corporate Pkwy	
	Suite 200	
	Sunrise, FL 33325	
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address		
Name of New Registered Agent		
(Florida str	reet 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 2	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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	Presider	ANDRÉS VELÁZQUEZ OLAVARRIETA	490 Sawgrass Corporate Pkwy
X Add			Suite 200
Remove			Sunrise, FL 33325
2) Chango	Directo	martin alfredo Velazquez castro	490 Sawgrass Corporate Pkwy
2) Change Add			Suite 200
Remove			Sunrise, FL 33325
3) Change	Directo	MARK A. CHAVES	490 Sawgrass Corporate Pkwy
. X Add			Suite 200
Remove			Sunrise, FL 33325
4) Change			
Add			·
Remove			TALE
5) Change			AUG +
Add			
Remove			
6) Change	<u> </u>		ATE PRIDA 32
Add			
Remove			

	, FILED SECREJARY OF STATE TALLAHASSEE, FLORID
If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	12 AUG -9 PM 1: 32
·	
	
If an amendment provides for an exchange, reclassification, or cancellation	on of issued shares,
provisions for implementing the amendment if not contained in the amendment (if not applicable, indicate N/A)	ndment itself:
<u> </u>	

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The date of each amendment(s) adoption: August 0, 2012		MCEMINOSEC (LOMB.
Effective date if applicable:		<u> 12 AUG -9 PM 1:32</u>
	(no more than 90 days after amend	lment file date)
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cafficient for approval.	ast for the amendment(s)
	proved by the shareholders through voting groups. reach voting group entitled to vote separately on	
	for the amendment(s) was/were sufficient for app	roval
by	(voting group)	,,
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholde	er action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder act	tion and shareholder
Dated	8/8/cm	
Signature	Ald	
	lirector, president or other officer - if directors or	
	ed, by an incorporator – if in the hands of a receive sted fiduciary by that fiduciary)	er, trustee, or other court
	Mark A. Chaves	
	(Typed or printed name of person sign	ning)
	Director	
	(Title of person signing)	