2150000 [260]

		
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
	siness Entity Name	<u> </u>
ud)	siness Entity Name	,
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Eiling Officer	
Special instructions to	raining Officer.	
L		

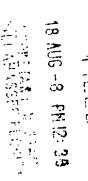




100316126651

08/08/18--01012--010 **65.00

S TALLENT AUG 1 0 2018



(My)

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: <u>120 Tro</u> BER: P 15000	insport Inc	
DOCUMENT NUMB	ER: P 15000	012601	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Robe	Part Easter Name of Contact Person	
Name of Contact Person			
	120 1	ransport In	<u>C</u>
	10 Box	(6240	
	Gaines	Address City/ State and Zip Cod	32627
	N	A Sed for future annual report	notification)
	i;-mail address; (to be us	sed for future annual report	innincanon)
For further information	concerning this matter, pleas	se call:	
	ert Easter	at (352	de & Daytime Telephone Number
Name o	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:
□ \$35 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)
Ame Divi: P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, F1, 32314	Amenc Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to

	Articles of Inc	orporation		
120 -	Transport	Torc		
		y filed with the Florida Dept. of State)		
PISC	200012601			
	Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name o	f the corporation:			
N	7	The new		
name must be distinguishable and contain t	he word "corporation "Corp," "Inc," or "	a," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		408 W. University AVE		
		Gainesville, FL 32601		
		- 7,000		
C. Enter new mailing address, if applicable		Pr Bax 6240		
(Mailing address <u>MAY BE A POST OFFI</u>	CE BUX	Po Box 6240 Gamesville, FL 326		
		17GINESVITTE FL 326		
D. If amending the registered agent and/or i	egistered office addr	ess in Florida, enter the name of the		
new registered agent and/or the new regi	stered office address			
Name of New Registered Agent	NIA	A		
(Florida stree		ret address)		
New Registered Office Address:	NA	Florida		
	,	(Cuy) (Zip Code)		
New Registered Agent's Signature, if changi	ng Registered Agent:			
I hereby accept the appointment as registered a	gent. I am familiar v			
		# (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2		
	NA			
	Signature of New R	egistered Agent, if changing		
		egistered Agent, if changing		
		78 ED		

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 Emancial 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	PT John	Doc	•
X Remove	V <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	NA	NA	N/A
Add	ľ	'	
Remove		•	
2) Change	NA	N/A	NA
Add		•	·
Remove		NA	0110
3) Change	NH	10,17	<u> </u>
Add Remove			
4) Change	NA	NA	NIA
Add	_ 		
Remove			
5) Change	NB	ΔM	NA
Add	1 '		
Remove	f	ſ	
6) Change	NA	NA	NA
Add			
Remove			

	;	<u> </u>
		
		
		· · · · · · · · · · · · · · · · · · ·
	······································	
n amendment	provides for an exchange, reclassification, or cancellation of issued sha	ires.
<u>ovisions for im</u>	plementing the amendment if not contained in the amendment itself: while, indicate $N(A)$	<u> </u>
	<u> </u>	

		<u></u>

The date of each amendment(s) adoption: _	August 1,	2018	if other than the
date this document was signed.		—·	
Effective date <u>if applicable</u> :	August 1 (no more than 90 days aft	2018	
	(no more than 90 days aft	er amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department		nory filing requirements	s, this date will not be listed as the
Adoption of Amendment(s) (9	CHECK ONE)		
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for		of votes cast for the ame	ndment(s)
☐ The amendment(s) was/were approved by must be separately provided for each voti			
"The number of votes east for the an	nendment(s) was/were sufficie	nt for approval	
by	voting group)		
(voting group)		
☐ The amendment(s) was/were adopted by the action was not required.	he board of directors without s	hareholder action and sl	nareholder
The amendment(s) was/were adopted by t action was not required.	he incorporators without share	holder action and shareh	older
Dated August	1,2018		
	7,5/		
Signature(By a director, or	resident of other officer – if di	rectors or officers have r	not been
selected, by an i	ncorporator – if in the hands o		
appointed fiduci	ary by that fiduciary)		
	Robert East		
	(Typed or printed name of p	person signing)	
	Presider	1	
	(Title of person	signing)	