# P16000010990

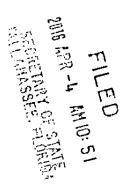
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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	FION:PCL	TRANSPORT CORF	P		
DOCUMENT NUMBER	R:	16000010990			
The enclosed Articles of	Amendment and fee are sub	mitted for filing.			
Please return all correspon	ndence concerning this matt	er to the following:			
		ALAN MARTINEZ	Z		
_		Name of Contact P	Person		
SIMPLEX GROUP					
<del></del>	Firm/ Company				
	5800 NW 74TH AVE				
_	Address				
	MIAMI, FL 33166				
		City/ State and Zip	Code		
	amartine	z@simplexgroup.net	t		
<del></del>	E-mail address; (to be use			tification)	
For further information co	oncerning this matter, please	e call:			
ALAN MART	INEZ / SIMPLEX GROUP	at (	305)	599-8287	
Name of C	Contact Person	Are	ea Code	& Daytime Telephone Number	
Enclosed is a check for th	e following amount made p	ayable to the Florida	Departn	nent of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☑\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)		\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section			treet Ad		
	Amendment Section Division of Corporations				
Division of Corporations P.O. Box 6327		Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

#### PCL TRANSPORT CORP

PCL TRANS	SPORT CORP
(Name of Corporation as cur	rrently filed with the Florida Dept. of State)
P1600001099	90
(Document Num	nber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes ts Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporatio	on:
name must be distinguishable and contain the word "corpo" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," word "chartered," "professional association," or the abbrevia  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)	The new oration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the ation "P.A."
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent	and the state of t
(Flor	rida street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam	Agent: niliar with and agree 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.

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>	<u>Name</u>		<u>Addres</u> s	
1) Change	VP	ROSA	PONS	13884 SW 65TH TER	
Add				MIAMI, FL 33183	
Remove					
2) Change				<u> </u>	
Add					
Remove					
3 ) Change			· · · · · · · · · · · · · · · · · · ·		
Add					
Remove					<del> </del>
4) Change					
Add					
Remove					· <del>-</del> · · ·
5) Change					
Add					
Remove					
6) Change					
Add				·	
Damaua					

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
•	
	·
	<u>.</u>
	n en
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

• The date of each amendment(s) adoption: date this document was signed.	, if other than th
Effective date if applicable:	
(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 document's effective date on the Department of State's records.	date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
☑ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	c(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by,"  (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	der
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated3/29/16	
Signature	
(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 co	urt
appointed fiductary by that figuriary)	
LUIS DEL NODAL	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	