Ph. 000028749

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C. CARRO INEES

SECULTARY OF STATE

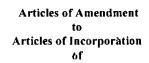
#16 MAY 23 PK L: 2

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	B/	ROTHERS 4 TRA	ANSPORT	INC		
DOCUMENT NUMBER:	P160	000028749				
The enclosed Articles of Amend	ment and fee are sub	omitted for filing				
Please return all correspondence	concerning this mat	ter to the followi	ng:			
		ALAN MARTI	NEZ			
		Name of Cont	act Person			
		SIMPLEX G	ROUP			
	Firm/ Company					
		5800 NW 74	TH AVE			
		Addre	ess			
		MIAMI, FL 33	166			
		City/ State and	l Zip Code	;		
	а	martinez@simple	exgroup.ne	et		
E-ma	il address: (to be use					
For further information concerning	ng this matter, pleaso	e call:				
ALAN MARTINEZ / S	IMPLEX GROUP	at (305	599-8287 le & Daytime Telephone Number		
Name of Contact	Person		Area Coo	le & Daytime Telephone Number		
Enclosed is a check for the follow	ving amount made p	ayable to the Flo	rida Depa	rtment of State:		
	3.75 Filing Fee & tificate of Status	☑\$43.75 Filing Certified Cop (Additional control enclosed)	ру	□\$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 Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301



BROTHERS 4 TRANSPORT INC

(Name of Corporation as of	currently filed with the Florida Dept. of State)
P160	000028749
(Document N	umber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statu its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corpora	tion:
	The new
name must be distinguishable and contain the word "con" "Corp.," "Inc.," or Co.," or the designation "Corp," "In word "chartered," "professional association," or the abbrev	rporation," "company," or "incorporated" or the abbreviation c." or "Co". A professional corporation name must contain the viation "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>	
	F S
C. Enter new mailing address, if applicable:	1912 W
(Mailing address MAY BE A POST OFFICE BOX)	
	<u>ာမို 🖛</u>
	29
D. If amending the registered agent and/or registered off	fice address in Florida, enter the name of the
new registered agent and/or the new registered office	address:
Name of New Registered Agent	
(F	lorida street address)
New Resistant Office Advages	, Florida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f	d Agent: familiar with and accept the obligations of the position
Thereby accept the appointment as registered agent. Tam's	unitial with and accept the obligations of the positions.
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 <math>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>	Address
1) Change	VP	LIENS, ISRAEL Y	1550 SW 131 AVE MIAMI, FL 33184
Add Remove			
2) Change	VP	CLAUDIA RODRIGUEZ SALENE	1550 SW 131 AVE
× Add			MIAMI, FL 33184
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach ad	ditional sheets	additional Arti	(Be specific)	ige(s) nere.	,		
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. <u>If an ame</u>	<u>ndment provi</u>	des for an exch	ange, reclassifi	cation, or canc	ellation of issu	ed shares,	
provision	ns for implement applicable i	enting the amer	ndment if not co	ontained in the	amendment it	<u>self:</u>	
(1) //(жаррнешые, і	maicule 1971)					
							- -
		· 				· - · · <u></u>	
							

5/17/16	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
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 date wil document's effective date on the Department of State's records.	I not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ 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)	
(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 (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)	_
ILIANA FORINGOA ENAMORADO	
ILIANA ESPINOSA ENAMORADO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	