P200000 26629

Office Use Only

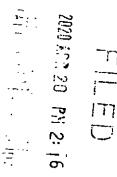


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APR 2 0 2020



Amend

APR 29 TOTAL ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SSI TRANSPORT	INC 			
DOCUMENT NUM	BER: P20000026629				
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	Jasur Bakhodirov				
	••	Name of Contact Persor	1		
	Jasur Bakhodirov				
	Firm' Company				
	Jasur Bakhodirov				
	Address				
	4798 Rummell Rd				
		City/ State and Zip Code	2		
	St Cloud, FL 34771				
	E-mail address: (to be us	sed for future annual report	notification)		
	on concerning this matter, pleas				
P		at (
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check t	or 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

Articles of Amendment to Articles of Incorporation of

to

SST	TD	.5	NICI	$\cap \cap$	D T	IMC
	115	٨.	13.7	1111	ıx ı	HYU.

(Name	-6.C	ala Gladadak Aba Mada	- D C	
P20000026629	or Corporation as curre	ntly filed with the Florid	a Dept. of State)	
1 20000020020	(Document Number	of Corporation (if known		
Pursuant to the provisions of section 607 its Articles of Incorporation:		•		amendment(s
A. If amending name, enter the new n	ame of the corporation:			
N/A				The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contraction and association."	Corp," "Inc," or "Co".	A professional corpora	rated" or the abbreviation	"Corp"
		N/A		
	B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			
		N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	(4)	200
	 /	N/A	•	2 1
		N/A		• [
D. If amending the registered agent an new registered agent and/or the ne			the name of the	2: 76
Name of New Registered Agent	N/A	<u> </u>	•	-
	N/A			
	(Florida	street address)		
New Registered Office Address:	N/A		, Florida	
		(City)	(Zip Ce	de)
New Registered Agent's Signature, if a I hereby accept the appointment as regis			igations of the position.	·
	Signature of New	Registered Agent, if char	1ging	
Check if applicable The amendment(s) is/are being filed p			о о	

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	\underline{V}	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) N/A Change	N/A	N/A	N/A	
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove			·	
6) Change				
Add				
Remove				

E. <u>If amending or adding additional Articles, enter change(s) here:</u> (Attach additional sheets, if necessary). (Be specific)
I would like to update the amount of shareholders from original 100,000 down to 99 shareholders.
Lalso got a Employer Identification Number: 85-0557192
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
I would like to update the amount of shareholders from original 100,000 down to 99 shareholders.

•

•	04/06/2020	
The date of each amendment(s date this document was signed.	adoption:	, if other than the
=	/A	
	(no more than 90 days after amendment f	ile date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing required Department of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for sufficient for approval.	the amendment(s)
	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the am	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by <u>N/A</u>		
	(voting group)	
04/06/20 Dated	20	
Signature	and B	
(By sele	a director, president or other officer – if directors or officer eted, by an incorporator – if in the hands of a receiver, trus ointed fiduciary by that fiduciary)	
	Jasur Bakhodirov	
	(Typed or printed name of person signing)	
	Jasur Bakhodirov	
	(Title of person signing)	