

F08000002105

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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600246231046

04/02/13--01018--020 \*\*52.50

W13 — 20438  
Name Change  
Amended

FILED  
2013 MAY -2 AM 11:56  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

\*00789, 00524, 00641, 00671  
5/8/13  
DNR



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 8, 2013

Erin Rash  
Customer Based Transportation, Inc.  
P.O. Box 1050  
Corsicana, TX 75151

SUBJECT: CORSICANA BEDDING TRUCKING, INC.  
Ref. Number: F08000002105

We have received your document for CORSICANA BEDDING TRUCKING, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a foreign (out of state) corporation and the document you submitted is for a domestic (Florida) corporation. I have enclosed the correct form for you to fill out and return to us.

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey  
Regulatory Specialist II

Letter Number: 813A00008250

RECEIVED  
MAY -2 AM  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CORSICANA BEDDING TRUCKING, INC  
Name of Corporation

**DOCUMENT NUMBER:** F08000002105

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**ERIN RASH**

Name of Contact Person

**CUSTOMER BASED TRANSPORTATION, INC**

Firm/Company

**PO BOX 1050**

Address

**CORSICANA, TX 75151**

City/State and Zip Code

**TAXINFO@CORSICANABEDDING.COM**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**ERIN RASH**

Name of Contact Person

at ( **903** ) **872-2591**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35.00 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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FILED  
2018 MAY -2 AM 11:56  
SECT. 100 OF STATE  
TALLAHASSEE, FLORIDA  
7D

F08000002105

CORSIKANA BEDDING TRUCKING, INC

2 TEXAS

3 03/01/2009

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 10-31-11

5. CUSTOMER BASED TRANSPORTATION, INC

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

KIM COBB

(Typed or printed name of person signing)

CFO

(Title of person signing)



## Office of the Secretary of State

### CERTIFICATE OF FILING OF

Customer Based Transportation, Inc.  
147881500

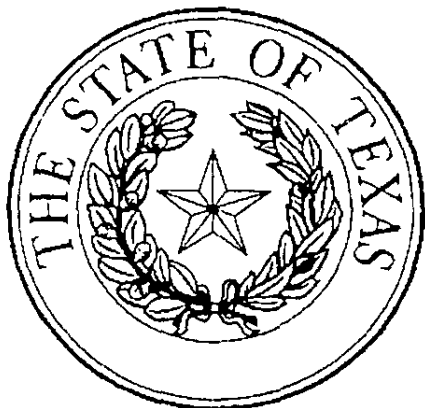
[formerly: CORSICANA BEDDING TRUCKING, INC.]

The undersigned, as Secretary of State of Texas, hereby certifies that a Certificate of Amendment for the above named entity has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

Dated: 10/31/2011

Effective: 10/31/2011



A handwritten signature in black ink, appearing to read "Hope Andrade".

Hope Andrade  
Secretary of State