P11000053469

(Requestor's Name)			
(Add	dress)		
(Add	dress)		
(City/State/Zip/Phone #)			
	WAIT MAIL		
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			
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TO: Amendment Section Division of Corporations
NAME OF CORPORATION: BEST USA A UTO TRANSPORT TWO
DOCUMENT NUMBER: P1000053 469
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JORGE 1. MIRO.
Bost USA A No TRANSport TWC
254 E 18 St
Hialeah Plorida 33010 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Orly Jimerez at (786) 277-9558 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee & 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 11, 2014

ORLY JIMENEZ 254 E 18 ST. HIALEAH, FL 33010

SUBJECT: BEST USA AUTO TRANSPORT, INC.

Ref. Number: P11000053469

We have received your document for BEST USA AUTO TRANSPORT, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please check only 1(one) box.

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.

Irene Albritton Regulatory Specialist II

Letter Number: 014A00019524

DEPARTMENT OF STATE

77 8 44 72 75 71

D. If amending the registered agent and/or registered office address in Florida, enter the name of the (Muiling address MAY BE A POST OFFICE BOX) C. Enter new mailing address, if applicable: (Principal office address MUST BE A STREET ADDRESS) B. Enter new principal office address, if applicable: "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co. $^{\circ}$. A professional corporation name must contain the word "chartered." "professional association," or the abbreviation "P.A." name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation мәи әул A. If amending name, enter the new name of the corporation: its Articles of Incorporation: Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to (Document Number of Corporation (if known) P11000053469 (<u>Name of Corporation as currently filed with the Flokida Dept. of State</u>) Articles of Incorporation Articles of Amendment

(Spo Code) _sbinol4 . 01025 New Registered Office Address: (Florida síreet address) Name of New Registered Agent new registered agent and/or the new registered office address:

thinne of New Registered Agent, if changing

l hereby accept the appointment as registal ed agint. I am familiar with and accept the obligations of the position.

New Registered Agent's Signature, if cheinging Registered Agent:



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	PT John	<u>Doc</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
_X Add	SV Sally	Smith	
Type of Action (Check One) 1) Change Add Remove	Title P	ORLY Jimenez	Address 254 E 18 st Hialakh FL 33010
2) Change	$\underline{\mathcal{P}}$	JORGE L. MIRO	254 E 18 St HIAlenh FL
Remove 3) Change Add Remove			33010.
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			



The date of each amendment(s) adoption: 08/27/2014	, if other than the
date this document was signed. Effective date if applicable: (No more than 90 days after amendment file date)	_
Adoption of Amendment(s) (CHECK ONE)	
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 : mendment(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.	
Dated	
Simon March 1	
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)	_
OR/4 Jimenez (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
PRESident	
(Title of person signing)	