N0800000 3580

(Red	questor's Name)	
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2010 MAY 12 PH 12: 20 SECRETARY OF STATE

Amend & M/C

TR

MAY 1 7 2010

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: FLORIDA TA	XI DRIVERS ASSOCIA	TION, INC
DOCUMENT NUM	IBER: N08000003580		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	W. G	UY JOSEPH	
	(Name o	f Contact Person)	
	(Firm	n/ Company)	
		OAKRIDGE RD	
	(Address)	
		IDO, FL 32809 ate and Zip Code)	
	(elly) su	and and Exp code)	
	E-mail address: (to be use	ed for future annual report notific	eation)
For further informati	on concerning this matter, pleas	se call:	
		at (407) 354-115 (Area Code & Dayti	55
(Name	of Contact Person)	(Area Code & Dayti	me Telephone Number)
Enclosed is a check f	or the following amount made p	payable to the Florida Departmen	nt 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)
	ing Address ndment Section	Street Address Amendment Section	
Divis	ion of Corporations	Division of Corporation	ons
	Box 6327	Clifton Building	O' 1:
1 a 1 a	hassee, FL 32314	2661 Executive Cente	r Circle

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

ROIDMAY 12 PM 12:27
TALLAHASSEE, FLORIGE

FLORIDA TAXI DRIVERS ASSOCIATION, INC. (Name of Corporation as currently filed with the Florida Dept. of State)

N08000003580

(Document Number of Corporation (if known)

ORLANDO CAB D	RIVERS ASS	OCIATION, INC			
e new name must be distinguishable and c breviation "Corp." or "Inc." <u>"Company"</u>	contain the word or "Co." may no	"corporation" or "in t be used in the name	corporated" or the		
. Enter new principal office address, if app Principal office address <u>MUST BE A STREE</u>		4027 W. OAKRIDGE RD			
	ET ADDRESS)	ORLANDO, FL 32	2809		
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		4027 W. OAKRIDO	GE RD		
		ORLANDO, FL 32	809		
If amending the registered agent and/or new registered agent and/or the new reg	istered office add	address in Florida, ei Iress:			
	istered office add	address in Florida, en Iress: GUY JOSEPH			
new registered agent and/or the new reg Name of New Registered Agent:	w. G	address in Florida, en Iress: GUY JOSEPH OAKRIDGE RD			
new registered agent and/or the new reg	W. G 4027 W (Flori	address in Florida, endress: GUY JOSEPH OAKRIDGE RD da street address)	nter the name of the		
<u>Name of New Registered Agent:</u>	W. G 4027 W (Flori	address in Florida, endress: GUY JOSEPH OAKRIDGE RD da street address)	nter the name of the		
<u>Name of New Registered Agent:</u>	W. G 4027 W (Flori	address in Florida, endress: GUY JOSEPH OAKRIDGE RD da street address)			

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)

Title	<u>Name</u>		Addre	ess			Type	e of Action
<u>P</u>	BASHA ABRAHAM			OX 592788 NDO, FL 3				Add Remove
<u>VP</u>	CHAVANE LAMARE			OX 592788 NDO, FL 3				Add Remove
<u>D</u>	BARREAU CELETON	<u>/E</u>	P.O.BO	OX 592788 NDO, FL 3	3 2859			Add Remove
(attach add	ng or adding additional Art litional sheets, if necessary). I PHILO TITLE D // REM	(Be specij) here:				
ASRULA K	ALAMAT """ //REMOVE							
NEW BOA	RD MEMBERS BEING A	ADDED				<u>.</u>		
1- W.GUY	JOSEPH (PRESIDENT)		4027	W. OAK	RIDG	E RD,	ORL	ANDO FL
2- RONY L	OUIS (VP)	4027 W.	OAKRII	DGE RD	, ORL	ANDO	FL	
3- AVENEL	LOUISSAINT VILSAIN	T (SECRE	TARY)	4027 W.	OAKR	IDGE I	RD O	RL FL
4- SIMON I	BIEN-AIME (VS) 4027	W. OAKRI	DGE RI	O, ORLA	NDO I	FL 328	09	
5- NICOLA	S SOBIA (TREASURY)	lt	ti	11	н			
6- RENEL	PAUL (ASST TREASUR	Y) "	11	11	11			
7-NELSON	JEAN (COUNSELOR)	11	**	11	11			
8- LEFIN C	GIRUS (COUNSELOR)	***	11	11	11			
9- JEAN JU	JSTE (COUNSELOR		14		1/	,		
						_		

The date of each amendment(s)	adoption: MAY 3TH, 2010
.,	(date of adoption is required)
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for approv	adopted by the members and the number of votes cast for the amendment(s) val.
There are no members or men adopted by the board of direct	mbers entitled to vote on the amendment(s). The amendment(s) was/were tors.
Dated MAY 3	TH, 2010
Signature	
have n	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	W. GUY JOSEPH
- -	(Typed or printed name of person signing)
_	PRESIDENT
	(Title of person signing)

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