## PO1000039029

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION: Vavgas Trunsportation INC.  DOCUMENT NUMBER: PO 1000039029				
DOCUMENT NUMBER: PO 1000039029				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Rosendo J Vargas  Name of Contact Reson  Vargas J (ans por tatron INC  Firm/ Company  350 N. Industrial Loop  Address  LeBelle F1 33935  City/ State and Zip Code				
E-mail address (to be used for future annual report notification)				
For further information concerning this matter, please call:  Proceeding the matter, please call:  Proceeding the matter, please call:  Proceeding the matter, please call:				
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  □ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  □ \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building				

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to

Articles of Incorporation

of

Vargas Transporteto	pn Mc.	
(Name of Corporation as curr	ently filed with the Florida Dept. of State)	
PO 10000 3	9029	
	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation:		wing amendment(s) to
A. If amending name, enter the new name of the corporation	<u>-</u>	
	in the second se	The new
name must be distinguishable and contain the word "corpor "Corp" "Inc.," or Co.," or the designation "Corp." "Inc," o word "chartered," "professional association," or the abbreviatio	or "Co". A professional corporation name m	e tabbreviation ust contain the
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u> )		
		2
		<del>- 2</del>
C. Enter new mailing address, if applicable:		11
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
		<del></del> . ,
	-dducer in Florida, antau the name of the	:- 
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add		<b>'</b> _
Name of New Registered Agent		
(Florid	la street address)	
New Registered Office Address:	, Florida	Zıp Codei
	(City)	sip Code,
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famil	<u>gent:</u> liar with and accept the obligations of the position	on.
Signature of Ne	ew 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 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> <u>J</u>	John Doe	
$\underline{X}$ Remove	<u>y</u> <u>y</u>	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	Maria 6 Vargas	202 N. 31d St
Add			Immokalee FI
X Remove			34142
2) X Change	<u>P</u>	Rosendo J Vargas	1324 Everglade Ave LaBelic Fi
Add Remove 3 ) Change Add	VP_	Sandra R Vargas	33935 1324 Everglade Are Labelle FI
Remove			3 3935
4) Change			
Remove			
5) Change			
Add			
Rепюче			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)	
<del></del>		
<del>11-1-1</del>		
		un MATRICA
L. C. Price Co.		
an amendment provides for an excherovisions for implementing the amer	auge, reclassification, or cand adment if not contained in the	cellation of issued shares. e amendment itself:
(if not applicable, indicate N/A)		
	<del></del>	

The date of each amendment(s) adoption:	9/01/2020	if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date	)
Note: If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing requirement of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by t by the shareholders was/were sufficient for	he shareholders. The number of votes cast for the ame or approval.	endment(s)
	the shareholders through voting groups. The following group entitled to vote separately on the amendment	
"The number of votes cast for the an	mendment(s) was/were sufficient for approval	
by	voting group)	
!	voting group)	
☐ The amendment(s) was/were adopted by t action was not required.	he board of directors without shareholder action and s	hareholder
☐ The amendment(s) was/were adopted by to action was not required.	he incorporators without shareholder action and sharel	nolder
Dated 9 02 Signature 700000	12020	
Signature	1. Num	
( <b>B</b> y a director, pi	resident or other officer - if directors or officers have:	
	ncorporator – if in the hands of a receiver, trustee, or c ary by that fiduciary)	other court
аррописа пачен	(ay by that indically)	
	(Typed or printed name of person signing)	
	(Title of person signing)	
	(Title of person signing)	